## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P94000028058 (3)

VAN DOME CORP.

FILED
May 11 1998 8:00am
Secretary of State



1001 S BAYSHORE ( SUITE 2706 MIAMI FL 33131	DR	1110 BRICKELL AVE			]	
					i	
MAM FL 33131			ST 700			
	MAM FL 33131		MIAMI FL 33131		DO NOT WRITE IN THIS SPACE	
		US			3. Date Incorporated or Qualified	
A 53-1-164-14					04/13/1994	
2. Principal Place of		2a. Mailing Address			4. FEI Number	Applied For
	CKELL AVENUE	26			65-0481921	Not Applicable
Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional
22 Suite	700	27]			G, Continuate of States Desired	Fee Required
City & State	· •	City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 MiAmi		28			Trust Fund Contribution Added to Fees	
Zip & Zu z J Country		Z <sub>i</sub> p Country		1	8. This corporation owes or has paid the curren	t year Intangible
24 33131	25 <i>U</i> , S. A ·	29 30			Personal Property Tax due June 30.  Yes X No	
9, 1	sme and Address of Current	Registered Agent			10. Name and Address of New Registered Age	ent
Fried, M	ARK E		81	Name		
1110 BRICKELL AVE				Stroot Ad	dress (P.O. Box Number is Not Acceptable)	
STE 700			62	Sileer Au	duress (F.O. Box Number is Not Acceptable)	
MIAMI FL 33131			63			
	· +- · <del>* •</del>		<u> </u> _	L		
			84	City	FL	35 Zip Code
11. Pursuant to the r	erovisions of Sections 607 0502	and 607 1508 Florida Statute	e the ehour	a-named co	reporation automita this atatament for the number of all	and a its sociatored
onice or registers	ed adent, or both, in the State o	)i Florida. Such change was a	iuthorizad bi	the corpor	ration's board of directors. I hereby accept the appoin	anging its registered
agent. I am famil	iar with, and accept the obligat	ions of, Section 607.0505, Flo	rida Statute:	5.	, , , , , , , , , , , , , , , , , , , ,	v
SIGNATURE						
	typed or printed name of mystered agent OFFICERS AND			nt signature rec	quired when reinstating) DATE	
TITLE DPS			13.	<del></del>	ADDITIONS/CHANGES TO OFFICERS AND DI	
		☐ DELETE	1.1 TITLE	-	L	Change
	POVIC, MILAN		1.2 NAME	1		
	LFERINO 2B		1.3 STREET	ADDRESS		
CITY-ST-ZIP LIM	ASSOL CY		1.4 DRY-S	T-ZIP		
TITLE		DELETE	2.1 TITLE			Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET	ADDRESS		
CITY-ST-ZIP						
TITLE		DELETE	2. 4 CITY - 5 3.1 TITLE	51-211		Change
NAME						Change L. Adultion
			3.2 NAME			
STREET ADDRESS			3.3 STREET			
CITY-ST-ZIP			3.4. CITY - S	1-21P		
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME	ŀ	_	
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP						
TITLE		DELETE	5.4 CITY-S'	1 - ZIP		Change Addition
<b>!</b>		C Defet	6.1 TITLE			Change
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST	r-zip		
14. I hereby certify th	at the information supplied with	this filing does not qualify for	the exempt	ion stated i	n Section 119.07(3)(i), Florida Statutes. I further certify ture shall have the same legal effect as if made under	that the information

indicated on this annual report or supplymental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of this color and the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or shall all achiment with an address.

SIGNATURE:

DAL DAME

6-22

2.2-12