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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

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Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent LAW FIRM OF LAWRENCE J. SPIEGEL CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134 84 City FL 85 Zip Code 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 Street Address (P.O. Box Number is Not Acceptable) 86 Street Address (P.O. Box Number is Not Acceptable) 87 Street Address (P.O. Box Number is Not Acceptable) 88 Street Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Acceptable) 80 Street Address (P.O. Box Number is Not Acceptable) 81 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 Street Address (P.O. Box Number is Not Acceptable) 86 Street Address (P.O. Box Number is Not Acceptable) 87 Street Address (P.O. Box Number is Not Acceptable) 88 Street Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Acceptable) 80 Street Address (P.O. Box Number is Not Acceptable) 81 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 Street Address (P.O. Box Number is Not Acceptable) 86 City Street Address (P.O. Box Number is Not Acceptable) 87 Street Address (P.O. Box Number is Not Acceptable) 88 City Street Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Acceptable) 80 Street Address (P.O. Box Number is Not Acceptable) 81 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 84 City Street Address (P.O. Box Number is Not Acceptable) 85 Street Address (P.O. Box Number is Not Acceptable) 86 City Street Address (P.O. Box Number is		te	⊢ ¬	State						
9. Name and Address of Current Registered Agent LAW FIRM OF LAWRENCE J. SPIEGEL CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134 B3 City LPursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes. the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, are familiar with, and accept the objections of, Section 607.0505, Florida Statutes. GNATURE GNATURE GNATURE P OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. LE P PALOMINO, RAMON 12. NAME PALOMINO, RAMON 12. NAME PALOMINO, RAMON 12. NAME PALOMINO, RAMON 12. NAME PALOMINO, PERLA 13. STREET ADDRESS MIAMI FL 33172 LE VST DELETE 11. TITLE Change Addition Change Ch		Country	Zip		Country	,	B. This corporation owes or has p	ald the cur	rent year	
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I. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. GNATURE Signature, hybed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE							dress (P.O. Box Number is Not Accepts	Box Number is Not Acceptable)		
I. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. It am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. IGNATURE IGNATUR									85 Zi	p Code
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4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

DELETE

DELETE

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 the corporation or 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 bylanged, or open attachment with an address.

SIGNATURE

STREET ADDRESS

CITY-\$1-ZIP

TITLE

NAME

3/18/98(305)591-0500

Change

Change

Addition

Addition

FILED

Apr 15 1998 8:00am

Secretary of State