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

FILED **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT 98 MAY -1 PH 12: 23 Secretary of State DIVISION OF CORPORATIONS 1998 SE SEATE LECEIDA P94000037963 (3) DOCUMENT # SUNCOAST EAST NO. 1, INC. Mailing Address Principal Place of Business C/O OPPENHEIM & ASSOCIATES C/O OPPENHEIM & ASSOCIATES 3191 CORAL WAY, STE. 800 3191 CORAL WAY, STE. 800 DO NOT WRITE IN THIS SPACE MIAMI FL 33145 MIAMI FL 33145 3. Date Incorporated or Qualified 05/16/1994 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0506535 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 Country Country Z_{10} 8. This corporation owes or has paid the current year Intangible Zip Personal Property Tax due June 30. Yes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name OPPENHEIM. STEVEN P C/O OPPENHEIM & ASSOCIATES Street Address (P.O. Box Number is Not Acceptable) 82 3191 CORAL WAY, STE. 800 83 **MIAMI FL 33145** Zip Code 11. 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. 2000025155tp. - Addison DELETE 1.1 3(TLE TITLE CAMOLETTO, SERGIO 1.2 NAME NAME -05/07/98--01081--020 3191 CORAL WAY, STE. 800 1.3 STREET ADDRESS ****900.00 ****150.00 STREET ADDRESS MIAMI FL 33145 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DVPS DELETE 21 THUE TITLE RIVA, ROBERTO NAME 22 NAME 3191 CORAL WAY, STE. 800 STREET ADDRESS 23 STREET ADDRESS MIAMI FL 33145 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - 7IP CITY - ST - ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Addition Change DELETE 61 TITLE TITLE 6.2 NAME NAME 63 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby 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 trusted 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 on an altachment with an address.

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