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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000041645 (0)

FILED Jan 30 1998 8:00am Secretary of State

CONCORD ASSOCIATES, INC. Principal Place of Business Mailing Address 4410 S.W. 74 AVENUE 685 WEST PARK DRIVE MIAMI FL 33155 **SUITE #205** MIAMI FL 33172 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/03/1994 2. Principal Place of Business 2a. Mailing Address Applied For 26 21 65-0600565 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 29 30 ☐ Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 FONG, REBECA 685 WEST PARK DRIVE Street Address (P.O. Box Number is Not Acceptable) SUITE 205 83 **MIAMI FL 33172** 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 change of the corporation of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of the purpose of change was authorized by the corporation of the purpose of the purpose of change was authori statement for the purpose of changing its registered SIGNATURE epistere agent and little if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change ___ Addition FONG, REBECA 1.2 NAME 685 W. PARK DRIVE, #205 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33172 CITY - ST- ZIP 1.4 CITY-ST-7IP DELETE TITLE 2.1 TITLE ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST- ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change ☐ Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIF DELETE Addition TITLE 6.1 TITLE __ Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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 eath; 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 pame appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: