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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 23 1998 8:00am Secretary of State

	MENT # P940(R INVESTMENTS, INC.	0043294 (5)			
Principal Place of Business Mailing Address				1 15091001 (sa 1011) Billit Sailt Chis Antil Chis Chi	EAR DITTR DIAM MATTER MATT 1884
2500 HOLLYWOOD BLVD. 2500 HOLLYWOOD BLVD.					
SUITE 212 SUITE 212 HOLLYWOOD FL 33020 HOLLYWOOD FL 33020				DO NOT WRITE IN THIS	SPACE
		7,000 11 0000		3. Date Incorporated or Qualified	
-				06/09/1994	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0497513	Not Applicable
		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
		27			Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
24	25	29	30	1	Yes No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registered	Agent
	ANELLA, ROSS		B1 Name		
	00 HOLLYWOOD BLVD.		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
SUITE 212					
ļ HC	DLLYWOOD FL 33020		83		
			84 City	FL	85 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 #	gent and title if applicable (NOTE	Registered Agent signature requir	ed when reinstating) DATE	
12.		ND DIRECTORS	13,	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	DPST	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	ELLNER, MARCUS 20185 E. COUNTRY CLUB	DD ADT TOO	1.2 NAME		
STREET ADDRESS	NORTH MIAMI BEACH FL 3		1.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH MAMI BEACH PE 3	DELETE	1.4 CITY - ST - ZIP		Change Addition
TITLE			2.1 TITLE 2.2 NAME		Li Change Li Addition
NAME STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME		*	3.2 NAME		. —
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		ļ
CITY-ST-ZIP		T1	4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP		Change Addition
TITLE NAME		ריי מנונונ	6.1 TITLE 6.2 NAME		THORING THATCHOU
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
2011-31-51F			0.7 011 1 01 2H		

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 arn 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 changed, or on an attachment with ap 3 dress.

SIGNATURE:

Marcus Ellner

3/9/98

(954) 925-3355