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

PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 01 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 P9400053573 (9)

1. Corporatio	TORS CORPORATION	, 0.0000	-,		II TIVAT III EI TIIII ITAAR IIII RARI
Principal Plac	e of Business	Mailing Address			AL BUILDA HARRI BARKI LIBBAN KARI HABI
851 THREE ISLANDS BLVD. 851 THREE ISLANDS B			RIVD		
UNIT 306		UNIT 306		DO 1107 WEITE W 7149 00 105	
HALLANDALE FL 33009		HALLANDALE FL 33009		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
9 Principal P	lace of Business	2a. Mailing Address		07/20/1994 4. FEI Number	Applied For
21		26		65-0506220	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		6, Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Register	ed Agent
	(ERICA LAWYER	MARC FLACHON			
	343 ALMERIA AVENUE			ddress (P.O. Boy Number is Not Acceptable)	- IN 1/ 3 A/
CORAL GABLES FL 33134			83	851 THARE ISLAUDS	BLUD #306
			[83]		
		k.	84 City 11.		L 85 Zip Code
dd Diseiont	to the provisions of Continue 607.06	1 2 c07 1500 Finda Di	TV9	CLANDALE F	-L 33009
office of r	egistered agent, or both, in the State	of levida Such change w	as authorized by the corpo	corporation submits this statement for the purpos oration's board of directors. I hereby accept the	appointment as registered
agent. I a	m familiar with, and accept the oblig	1 ous of Section 607.0505	, Florida Statutes.	. U	24/98
SIGNATURE	Stonature, typed or printed name of registered age	ut men in if applicable (NOTE Registered Agent signature re		
12.	OFFICERS AND	<u> </u>	13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE	Р	DELET e	1,1 TITLE		Change Addition
NAME	Flachon, Marc R. H		1.2 NAME		
STREET ADDRESS 851 THREE ISLANDS BLVD.,		UNIT 306	1.3 STREET ADDRESS		
CITY-ST-ZIP	HALLANDALE FL 33009		1.4 CITY - ST - ZIP		
TITLE		☐ DELETE		VP	Change X Addition
NAME			22 NAME	FLACHON STEPHANE	JA WITTON
STREET ADDRESS			2.3 STREET ADDRESS	851 THREE ISLANDS 131	. VD. UNII 306
CITY-ST-ZIP			2. 4 CITY - ST - ZIP	FLACHON STEPHANE 851 THREE ISLANDS BL HALLANDALE, FL 3300	29
TITLE		☐ DEL ete	3.1 HILE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		☐ D€LETE	34. CITY-ST-ZIP		Change Addition
TITLE			4.1 TITLE		Li Change Li Addition
NAME expect (Donces			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME		tar Section	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		Ì
CHY+ST-ZIP			5.4 CHTY-ST-ZIP		
TITLE		DELETE	61 TITLE		☐ Change ☐ Addition
			I		

6.3 STREET ADDRESS

14. I hereby certify that the information supplies 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 supplies that 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 changed, or on an anachment with an address.