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

**PROFIT CORPORATION** ANNUAL REPORT 1998 DOCUMENT #



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000068943 (7)

**FILED** Apr 27 1998 8:00am Secretary of State

1. Corporation	on Name BUSINES			(						
Principal Plac	ce of Busines	s	Mailing Add	iress				AIN <b>aa</b> na <b>c</b> hal iolia i		I IAH IIII
198 NW 79TH ST. 198 NW 79TH ST. MIAMI FL 33150 MIAMI FL 33150										
								E IN THIS SPACE	<u>:</u>	
							3. Date Incorporated or Qualified 09/19/1994			
2. Principal F		ness	<b>2a.</b> Mailing , <b>26</b>	······································			4. FEI Number 65-0633816		<del></del>	olied For Applicable
Suite, Apt.	. #, etc. -		Suite, Ap	Suite, Apt. #, etc.			5. Certificate of Status Desired		.75 Ac	dditional juired
City & Stat	te		City & S	City & State			6. Election Campaign Financing	\$5	5. <b>00</b> N	vlav Be
23			28				Trust Fund Contribution		dded to	
Žiρ		Country	<b>Z</b> ip		Country	ı	8. This corporation owes or has pa			
24	25     29   9. Name and Address of Current Registered Agent			ani	30		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent			
111	BIN, JOEL	and Address of	Current Negistered Age	P(1)	81	Name	10. Name and Address of New Re	igistered Agent		
	18 NW 79TH	I QT								
MIAMI FL 33150					82	Street Ade	dress (P.O. Box Number is Not Acceptat	ole)		
		••			83			412.12.1		
					84	City		FL  85	Zip Co	ode
11. Pursuant office or a agent. La	to the provisi registered ag am familiar wi	ions of Sections 6 lent, or both, in the th, and account the	07.0502 and 607.1508, I e State of Plorida Such o o obligations of, Section	lorida Statute hange was a 607.0505, Flo	es, the above authorized by orida Statutes	named co the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	ourpose of chang of the appointme	jing its nt as re	registered gistered
SIGNATURE			tered agent and little if applicable	ALCOY.		·· · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·
12.	J		RS AND DIRECTORS	(NOIL	13.	ni signature req	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIREC	CTORS	IN 12
TITLE	PD			DELETE	1.1 TITLE	<u> </u>	7,00110101010101010101010101010101010101	Cha		Addition
NAME									•	
STREET ADDRESS	3530 MY	ystic pointe (	OR, #513		1.3 STREET	ADDRESS				
CITY-ST-ZIP	AVENTU	RA FL			1.4 CITY - S	r - ZIP				
TITLE				DELETE	21 TITLE			☐ Cha	ange	Addition
NAME					2.2 NAME					
STREET ADDRESS					2.3 STREET	ADDRESS	: -			
CITY-ST-ZIP				T 65: 6##	2.4 CITY-S	T - ZIP				
TITLE			L	] DELETE	3.1 TITLE			Cha	ange	☐ Addition
NAME					3.2 NAME					
STREET ADDRESS					3.3 STREET					
CITY-ST-ZIP TITLE				DELETE	34. CITY-S 4.1 TITLE	1-211	***************************************	☐ Cha	3000	☐ Addition
NAME			-	2 000010	4 2 NAME	Ì		L 014	rige i	- Addition
STREET ADDRESS					43 STREET	nnorce				
CITY-ST-ZIP					4.4 CITY-ST	i .				
TITLE				DELETÉ	5.1 TITLE		1	☐ Cha	inge	Addition
NAME					5.2 NAME				•	
STREET ADDRESS					5.3 STREET	ADDRESS				l
CITY-ST-ZIP					5.4 CITY-ST	- 1				
TITLE				DELETE	6.1 TITLE			☐ Cha	inge	☐ Addition
NAME					6.2 NAME	1				
STREET ADDRESS					63 STREET	NDDRESS				j
CITY-ST-ZIP					6.4 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 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 on an attachmon with an address.

SIGNATURE: