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 Feb 06 1998 8:00am Secretary of State

1		# P940 Entals, Inc.	0006	9221 (7)				1 (8)
Principal Place of Business Mailing Address							I TORRIPON HE IRRIP RIDIT BORIF OCHT GORFI BORIF		
777 - 41ST S MIAMI BEACH		RTH FLOOR	P(PO BOX 403006 MIAMI BEACH FL 33140 US			DO NOT WRITE IN T	HIS SPACE	
							3. Date Incorporated or Qualified		
2. Principal P	Place of Busi	0000	1 3-	Mailing Address			09/16/1994		
21	IACO OI LIUSI	1055	├ ─¬	2a. Mailing Address 26			4. FEI Number		Applied For
Suite, Apt.	#, etc.			Suite, Apt. #, etc.			65-0527888		Not Applicable Additional
22			27	27			5. Certificate of Status Desired	+	Regulred
City & Stat	te		<u> -:</u> -	City & State			6. Election Campaign Financing	 -	May Be
23			28				Trust Fund Contribution		to Fees
Zip 24		Country 25	29	Zip	Count 30	ry	This corporation owes or has paid the Personal Property Tax due June 30.		nlangible No
		and Address of Cu	rrent Regis	lered Agent			Name and Address of New Registe	red Agent	
	vael, joel				8	1 Name	•		
	7 - 41ST ST	Ī			8	2 Street Ac	Street Address (P.O. Box Number is Not Acceptable)		
	URTH FL				_		· · · · · · · · · · · · · · · · · · ·		
MIA	AMI B CH FL	_ 33140			8:	3			
					8			F	Code
11. Pursuant i office or ri agent. I a	to the provis registered ag im familiar wi	ions of S ections 607. Jent, or both, in the Si ith, and a ccept the ob	0502 and 60 tate of Florid bligations of	07.1508, Florida St da. Such change w , Section 607.0505	atulos, the abo vas authorized b 5, Florida Statuli	ve-named co by the corpo es.	orporation submits this statement for the purpor ration's board of directors. I hereby accept the	se of changing appointment a	its registered s registered
SIGNATURE	Signature typed	or printed harm of registeres	d agent and title i	if amplicable	(NOTE: Requitered A	pent signature re-	quired when rounstating) (1A	·	
12.			AND DIREC		13.		ADDITIONS/CHANGES TO OFFICERS		RS IN 12
TITLE	DPT			☐ DELETE	1.1 TOTALE			Change	☐ Addition
NAME	ISRAEL,				1.2 NAME				
STREET ADDRESS		ST STREET, FOUR	RTH FLOOF	₹	1.3 STREE	T ADDRESS			
CITY-ST-ZIP	MIAMI B	EACH FL 33140			1.4 CITY -	S1-ZIP			
TOTLE				□ DELETE	2.1 TITLE			Change	☐ Addition
NAME					2.2 NAME				
STREET ADDRESS					2 3 STREE	1 ADDRESS			
CITY-ST-ZIP				DELETE	2 4 CITY	S1 - ZIP		——————————————————————————————————————	
TITLE				☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME STREET ANDRESS					3.2 NAME				İ
STREET ADDRESS CITY+ST-ZIP						T ADDRESS	3		
TITLE				DELETE	3.4 CITY-	21-ZIP		Change	☐ Addition
NAME				EJ VECULE	4. 2 NAME				L ROUTION ;
STREET ADDRESS						T ADDRESS			
CITY-ST-ZIP					4.4 CHY-	į.			
TITLE				DELETE	51 TITLE	· · · · · · · · · · · · · · · · · · ·	,	Change	☐ Addition
NAME					5.2 NAME			,	
STREET ADDRESS					5.3 STREE	T ADDRESS			İ
CITY-ST-ZIP				<u></u>	5.4 CITY -	ST-ZIP			
TITLE				☐ DELFTE	6.1 1111.6			☐ Change	☐ Addition
NAME					6.2 NAME				
STREET ADDRESS					G.3 STREL	LADORESS			
CITY-ST-ZIP									

Inereby certify that the information supplied with this filing does not qualify for the exemption stated in Soction 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 of 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 charged, or on an attach per with an address.