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

DOCUMENT #

P94000070212 (3)

PRINPASA, INC.

CITY-ST-ZIP

1

FILED									
May 04 1998 8:00am									
Secretary of State									
J									

Principal Place of Business			Mailing Address				1 1003/1001 III 10111 01011 00111 00111 00111 00111	TAIL ARILL I	/601 010	(181 188)	
3701 N. COU	NTRY CLUB		3701 N. COUNTRY CLUB								
1603 AVENTURA FL 33180			#1603 AVENTURA FL 33180				DO NOT WRITE IN THIS SPACE				
US		US	TOTAL TE SOLO				3. Date Incorporated or Qualified				
							09/22/1994				
J	lace of Business	28. N	lailing Address				4. FEI Number		Арр	lied For	
21		26					65-0523307		-	Applicable	
Suite, Apt.	#, əl c.	h1	Suite, Apt. #, etc.				5. Certificate of Status Desired	• •	-	lditional	
City & State	a	27	ity & State				• Floring O		ee Req		
23	o	28	·				6. Election Campaign Financing Trust Fund Contribution		5.00 M dded to		
Zip	Country		ip	Coul	ntry		8. This corporation owes or has paid the c				
24	25	29		30			Personal Property Tax due June 30.	Yes			
	9. Name and Address of Curre	ent Register	red Agent				10. Name and Address of New Registere	d Agent			
DA	LE, CHARLES S JR.				81	Name					
1	I N.E. FOURTH STREET			ŀ	82	Street Addre	ess (P.O. Box Number is Not Acceptable)				
ļ FO	RT LAUDERDALE FL 33301			j	-						
					B3						
				İ	64	City		B5	Zip Co	ode	
11 Purguant	to the provisions of Sections 607.00	.02 and 607	1509. Florida Statu	les the at		a-named corne	oration submite this statement for the purpose	of chanc	nina ite i	registered	
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida	Such change was	authorized	yd by	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointme	nt as re	gistered	
1	m taninai win, and accept the obli	ganons or, a	SECTION 607.0505, F	ionoa Stati	utes	14					
SIGNATURE	Signature, typed or printed name of registered a	gent and title if a	pplicable (NO	TE Registered	Ager	nt signature required	d when reinslating) DATE				
12.	OFFICERS A	ND DIRECTO		13.			ADDITIONS/CHANGES TO OFFICERS AT				
TITLE	DPT		□ DELETE	1.1 TITLE				∐ Ch	an g e	Addition	
NAME ORUZ-LIPMAN, EVELYN				1.2 NA							
STREET ADDRESS 3701 N. COUNTRY CLUB DR.						ADDRESS					
CITY-ST-ZIP TITLE	AVENTURA FL DS		DELETE	1.4 CIT 2.1 TIT		i - ZIP		Ch	2000	Addition	
NAME	RAMOS, RONALD		LJ better	2.1 III 22 NA				£ 611	viñe	Addition	
STREET ADDRESS	ARREST CONTROL OF THE PARTY OF					ADDRESS					
CITY-ST-ZIP	AVENTURA FL	11., # 1000		2.4 CI		í					
TITLE	DVP		DELETE	3.1 TIT		D.	VP elson Lipman 0537 Biscayne Bin VCN tura FL 331	Ch	ange	Addition	
NAME	CRUZ-DEJESUS, AIDA		, ,	3.2 NA	ME	Ns.	-1 SON LIPMAN				
STREET ADDRESS	3701 N. COUNTRY CLUB D	R. #1603		3.3 STI	REET.	ADDRESS 2	33 BISCAYNE BIN	2, 51	67-	215	
CITY-ST-ZIP	AVENTURA FL			3.4. CI	TY-S	I-ZIP A	VENTURA FL 331	80			
TITLE			DELETE	4.1 TIT	LE			☐ Ch	ange	Addition	
NAME				4. 2 NA	ME						
STREET ADDRESS	•					ADDRESS					
CITY-ST-ZIP			DELETE	4.4 CIT		i - ZIP		77.01	anno	Addition	
TITLE			□ nerete	51 TIF				L) Ch	ange	T WOULDN	
NAME Street address				52 NA		ADDRESS					
CITY-ST-ZIP											
TITLE			DELETE	5.4 CIT 6 1 TIT		. * £(f*		Ch	ange	Addition	
NAME				6.2 NA				517			
CTREET ARTIGECO						ADDRESS				- 1	

6.4 CITY-ST-ZIP

14. Thereby 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 suppliemental 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 attachmony with an address.

SIGNATURE:

4 - 22 - 98 (305) 933 - 8 3 94