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

PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS

FILED Apr 28 1998 8:00am Secretary of State

	or reprie	00076946 (0)				
EJGJ (CORP.)	I BIJA BIJI (B. 1841) BIJA (B. 1841)
						'A 16 01416 (B)), B (B), B (B)
Principal Place of Business Mailing Address						
2401 N.W. 69TH ST. 2401 N.W. 69TH ST. MIAMI FL 33147 MIAMI FL 33147						
MINNI FE 40	•••	MIRAN FE 93147			DO NOT WRITE IN THIS	SPACE
					3. Date Incorporated or Qualified	
					10/19/1994	
		2a. Mailing Address			4. FEI Number	Applied For
21 26					65-0538715	Not Applicable
22 27					6. Certificate of Status Desired	Fee Required
City & Sta	te	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees	
Ζip			Country	/	8. This corporation owes or has paid the c	
24	25		30		Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent NYON CHADON O 81 Name						Agent
	XON, SHARON Q		L			
150 WEST FLAGLER ST. 2200 MUSEUM TOWER			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33130			63			
1	- L - C - C - C - C - C - C - C - C - C		84	0		lac Zin Codo
					Fi	Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statute	s, the abov	e-named co	orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap-	of changing its registered
agent. I a	am familiar with, and accept the obl	gations of, Section 607.0505, Flo	rida Statute	S.	reliants board of directors. Friendly accept the at	pointinent as registeres
SIGNATURE						
12.	Signature, typed or printed name of registered a OFFICERS A	ND DIRECTORS	Hepistered Ag	ent signature rec	quired when reinstating) ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12
TITLE	D DELETE		1.1 TITLE			Change Addition
NAME	LESNIK, GARY		1.2 NAME			
STREET ADDRESS 2401 N.W. 69TH ST.			1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33147		1.4 CITY - ST - ZIP			
TITLE	-		2.1 TITLE			Change Addition
NAME	LESNIK, JIL		2.2 NAME			
STREET ADORESS	2401 N.W. 69TH ST.		2.3 STREET			
CITY-ST-ZIP TITLE			2. 4 CITY -: 3.1 TITLE	ST-ZIP		Change Addition
NAME	LEGINIC OFFILE		3.2 NAME			T owner D verifical
STREET ADDRESS	A 44 4 4 112 AATI 4 AT		3.3 STREET	ADDRESS		ı
CITY-ST-ZIP	MIAMI FL 33147		3.4. CITY-			
TITLE	☐ DELETE 4		4.1 TITLE			Change Addition
NAME			4. 2 NAME			Ì
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CiTY-5	T-ZIP		Change Classes
TITLE			5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME	400000		
STREET ADDRESS			5.3 STREET			
TITLE			5.4 CITY-5 6.1 TITLE	I-ZIP		Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6 3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY-S	1		
	and first at a information a soling	with the dillion stone and modification			in Caction 110 07/3/(i) Florida Statutos I further	sortify that the information

sailty for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of accurate and that my signature shall have the same legal effect as if adde under oath; that I am an real to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annual report or supplemental annual officer or director of the corporation or the receiver or block 12 or Block 13 if changed, or on an attachment.

305-693-5/33