SECOND NOTIFE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

MOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).



CITY-ST-ZIP

| COR | PROFIT RPORATION JAL REPORT 1998 | Sandra B Secretar | RTMENT OF STATE . Mortham y of State CORPORATIONS | 98 AUC 12 |
|--|---|---|--|--|
| DOCUMENT # P9400080681 (7) CBG INVESTMENTS, INC. | | | | 98 AUG 17 Pil 12: L9 SECTOR SEE STATE |
| Principal Plac | a of Ausiness | Mailing Address | | |
| 14029 S.W. 149TH LANE MIAMI FL 33186 US | | 14029 S.W. 149TH LANE MIAMI FL 33186 US | | DO NOT WRITE IN THIS SPACE |
| | | | | 3. Date incorporated or Qualified |
| 2. Principal Place of Business | | 2a. Mailing Address | and Hud | 11/03/1994 4. FEI Number Applied For |
| Suite, Apt. #, etc. | | 26 / X / V . DU | and Stud | 65-0551259 Not Applicable \$8.75 Additional |
| 22 | | 27 | 0 | 5. Certificate of Status Desired Fee Required |
| City & Stat | 10 | 28 Nomavil | le La | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| Zip | Country | - Zu 17/1 | Country | 8. This corporation owes or has paid the current year Intangible |
| 24 | 25 9. Name and Address of Currer | | 30 Thomas | Personal Properly Tax due June 30. Yes No 10. Name and Address of New Registered Agent |
| WAT | TS, JAMES | It Kedistelen Whour | 81 Name | 10. Raille and Address Of New Augustered Agent |
| 44000 C N/ 440TU (AND | | | 82 Street Add | fress (P.O. Box Number is Not Acceptable) |
| MIAN | MIAMI FL 33186 | | | 1000 (1.0. DOX Hullion to Hot Acceptable) |
| | | | 63 | |
| | | | 84 City | FL 85 Zip Code |
| office or | registered agent or both in the State | of Florida, Such change was a | uthorized by the cornorati | oration submits this statement for the purpose of changing its registered lion's board of directors. I hereby accept the appointment as registered |
| 1 | am familiar with, and accept the obliga | ations of, section 607.0505, Flor | rida Statutes. | |
| SIGNATURE | Signature, typed or printed name of registered ager | nt and fittle if applicable. (NO | TE: Registered Agent signature req | <u> </u> |
| 12. | OFFICERS AN | D DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | WATTS, JAMES | DELETE | 1.1 TITLE 1.2 NAME | Change Addition |
| STREET ADDRESS | 14029 S.W. 149TH LANE | | 1.2 NAME 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | MIAMI FL 33186 | | 1.4 CITY-ST-ZIP | |
| TITLE | | DELETE | 2 1 TITLE | Change Addition |
| NAME | | | 2.2 NAME | (|
| STREET ADDRESS | | | 2.3 STREET ADDRESS | 10000261 6 241\$ -08/18/9801005008 |
| CITY-ST-ZIP | | —————————————————————————————————————— | 2.4 CITY-ST-ZIP | ****158.75 ****158.75 Change Addition |
| TITLE | | DELETE | 3.1 TITLE 2.3.2 NAME | Change C Addition |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 3.4 CITY-ST-ZIP | |
| TITLE | | DELETE | 4.1 TITLE | Change Addition |
| NAME | | _ | 4.2 NAME | _ , _ |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | 4 | | 4.4 CITY-ST-ZIP | |
| TITLE | | DELETE | 5.1 TITLE | ☐ Change ☐ Addition |
| NAME I | | | 5.2 NAME | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP TITLE | | DELETE | 5.4 CITY-ST-ZIP 6.1 TITLE | Change Addition |
| NAME | | [_] DELETE | 6.2 NAME | Change Addition |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | |

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, or on an attachment with an address.

To whom it may linear flower be advised that I former a watto fresident of C. B. H. James a watter did not become the first particle of the Innual Report particle of the Innual Report