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

PROFIT CORPORATION **ANNUAL REPORT** 

1**9**98



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P9400085540 (0)					
	E III CORPORATION				
N 2002				A HARAKARA MAR KAKALARAR BERMA ARAWA ARAWA ARAWA ARAWA	IAN ANIAN ARINI BEANG BANG NAAN
Principal Place of Business		Mailing Address			0) 0)101 0111 0101 001 1401
19120 NW 5TH COURT MIAMI FL 33169		19120 NW 5TH COURT MIAMI FL 33169			
	•			DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
2. Principal P	Place of Business	2a. Mailing Address		11/23/1994 4. FEI Number	Applied For
21		26		65-0571463	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27 Chu & Clate			Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Z(p)	Country	8. This corporation owes or has paid the cu	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered	I Agent
GIB	SON, ANNETTE		81 Name		
19120 NW 5TH COURT			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33169			63		
			53		
			84 City	FI	85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above-named cor	poration submits this statement for the purpose	of changing its registered
office or r agent. I a	registered agent, or both, in the Stati im familiar with, and accept the oblig	e of Florida. Such change was as gations of, Section 607,0505, Flor	uthorized by the corpora rida Statutes.	ition's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE					
	Signature, typod or printed name of registered at		Registered Agent signature requ		
12.	OFFICERS AF	ND DIRECTORS  DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12 Change Addition
NAME	GIBSON, ANNETTE		1.2 NAME		
STREET ADDRESS	19120 NW 5TH COURT		1.3 STREET ADDRESS		
CITY+ST-ZIP	MIAMI FL 33169		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	GIBSON, CAROL		2.2 NAME		
STREET ADDRESS	19120 NW 5TH COURT		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33169		2. 4 CITY - ST - ZIP		
TITLE	D <sub>.</sub>	☐ DELETE	3.1 TITLE		Change Addition
NAME	BRAMWELL, ATTLI		3.2 NAME		
STREET ADDRESS	19120 NW 5TH COURT MIAMI FL 33169		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIMIT FL 33109	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME	•		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		ļ
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		ļ
CITY-ST-ZIP		Topiete	5.4 CITY - ST - ZIP		
TITLE		□ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	- I		6.3 STREET ADDRESS		ļ

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 trusted 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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

BOS 1530-WSO

**FILED** 

Apr 27 1998 8:00am

Secretary of State