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 # P95000016593 (2)

CONSOLIDATED EQUITY INVESTMENTS, INC.

Principal Place of Business Mailing Address

12150 NW 10TH STREET 12150 NW 10TH ST
CORAL SPRINGS FL 33071 CORAL SPRINGS FL 33071
US US

FILED Feb 04 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

				02/27/1995	
2 Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0566452	Not Applicable
Suite, Apt.	#. elc.	Suite, Apt. #, etc.			\$8.75 Additional
22	., 2.2.	27		5. Certificate of Status Desired	Fee Required
City & State	e	City & State		6. Election Campalgn Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	rrent year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes X No
	9. Name and Address of Current	t Registered Agent		Name and Address of New Registered	Agent
l P.	ALESTINE, MARK		81 Name		
12150 NW 10TH ST			82 Street Ac	ddress (P.Q. Box Number is Not Acceptable)	
CORAL SPRINGS FL 33071				,	
			83		
			84 City		85 Zip Code
			City	FL	_ las zip code
11. Pursuant	to the provisions of Sections 607,0502	and 607.1508, Florida Sta	atutes, the above-named co	orporation submits this statement for the purpose o	f changing its registered
office or re	eg stered agent, or both, in the State im familiar with, and accept the oblica	ot Florida, Such change wittions of, Section 607,0505	as authorized by the corpo . Florida Statutes.	ration's board of directors. I hereby accept the app	oointment as registered
			,		
SIGNATURE	Signature, typed or printed name of registered agen	nt and title if applicable. (NOTE. Registered Agent signature re-	quired when reinstating) DATE	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	PALESTINE, MARK		1.2 NAME		
STREET ADDRESS	12150 NW 10TH ST		1,3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL		1.4 CITY - ST - ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE	<u> </u>	Change Addition
NAME			3.2 NAME		
STREET AODRESS			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 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
		DELETE	. 6.1 TITLE		☐ Change ☐ Addition
I TITLE I					
		בין טבינונ			
NAME		ET peren	6.2 NAME		
		ي مديران			

dicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an ficer 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 lock 12 or Block 13 if changed to on an attachment with an address.

SIGNATURE:

STURBUPPLE RUTAIN

1/14/99

(954) 340 8546

3R2E034 (10/97)