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

PROFIT CORPORATION **ANNUAL REPORT**

1998

2. Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000018586 (4)

OSCH FINANCIAL GROUP INC.

Principal Place of Business	Mailing Address	
P.O. BOX 4067 HIALEAH FL 33016	8250 NW 165 TERR MIAMI FL 33016 US	

2a. Mailing Address

FILED Mar 13 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualified 03/03/1995

4. FEI Number

21				26					65-0563225		Nic	t Applicable
22	Suite, Apt. #, etc.			Suite 27	Suite, Apt. #, etc.			6. Certificate of Status Desired		\$8.75 A		
	City & State		City	City & State				6. Election Campaign Financing		\$5.00	May Be	
23				28					Trust Fund Contribution		Added t	o Fees
_,	Zip		Country	Zip			untry		8. This corporation owes or has pai	_		
24			25	29		30	_		Personal Property Tax due June			No
			and Address of Cur	rent Registered	Agent		1		10. Name and Address of New Rec	istered /	Lgent	
		.va, odal					81	Name				ļ
8250 NW 165 TERR					82	Street Addres	ss (P.O. Box Number is Not Acceptable	e)				
MIAMI FL 33016					83							
								0:			T-51	3 - N -
							84	City		FL	85 Zip (Jode I
11.	11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am fample a with, and accept the obligations of, Section 607,0505, Florida Statutes.											
SIC	SIGNATURE Signature Figure of Ingressed Rights and title If applicable (NOTE Registered Agent signature required when reinstating) DATE											
12.			OFFICERS (AND DIRECTORS	3	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTOR	\$ IN 12
TITL	E	D			DELETE	1.1 T	ITLE	Ţ			Change	☐ Addition
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STRE	EET ADORESS					5.3 S	TREET /	ADORESS]
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STAL	EET ADDRESS					6.3 S	TREET	ADDRESS				j
	-ST - ZIP						ITY-ST					
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 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 attachpent with an address.												