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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

SAMU	JMENT # P950 JEL J. RABIN, JR., P.A. ace of Business	00019531 (9)			 	
799 BRICKI	ELL PLAZA	799 BRICKELL PLAZA				
#606					DO NOT WOITE IN THE	C CDACE
MAMIFL 3	33133	MIAMI FL 33133	3133		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/09/1995	
2. Principal Place of Business 2a. Mailing Address			·		4. FEI Number	Applied For
26		26			65-0571504	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & St 23	tale	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30		This corporation owes or has paid the opersonal Property Tax due June 30.	Yes No
	9. Name and Address of Cu	rrent Registered Agent	81	Name	10. Name and Address of New Registere	d Agent
2400 SOUTH DIXIE HIGHWAY SUITE 105 MIAMI FL 33133			83	City	ss (P.O. Box Number is Not Acceptable)	
SIGNATURE	Signature, typed or printed name of registers	d agent and bite if applicable (NOT	E. Registered Agent			
12.	OFFICERS D	AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
NAME STREET ADDRES	GREEN, JONATHAN H	- Deteri	1.2 NAME 1.3 STREET AD 1.4 CITY-ST-2	i ł		
CITY-ST-ZIP TITLE	P DELETE			ZIP		Change Addition
NAME STREET ADORES	RABIN, SAMUEL J 799 BRICKELL PLAZA, SUITE 606			ORESS		
CITY-ST-ZIP	MIAMI FL 33131		2.4 CITY-ST-	ZIP	·	
TITLE	DELETE		3.1 TITLE	j		Change Addition
NAME OTOSET ADODES			3.2 NAME	00500		
STREET ADORES: CITY-ST-ZIP	°		3.3 STREET AD 3.4. CITY-ST-			
TITLE	 	DELETE	4.1 TITLE	<u></u>		☐ Change ☐ Addition
NAME		 ·	4. 2 NAME	1		
STREET ADDRESS	s		4.3 STREET AD	DRESS		
CITY-ST-ZIP			4.4 CITY-ST-2			
TOLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME	ļ		•
STREET ADDRESS	s		5.3 STREET AD	DRESS		
6m, CT 310	I		CADIDL OF T	.a		

14. Thereby certify that the information supplied with this filing document 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 of the receiver or fusite 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.

6.3 STREET ADDRESS

6.1 TITLE 6.2 NAME

DELETE

SIGNATURE

STREET ADDRESS

4/24/98 305-358-1064

Change

Addition

FILED

May 01 1998 8:00am

Secretary of State