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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P95000025783 (8)



FILED

Apr 29 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address

| 100 SE 2ND STREET 28TH FLOOR MIAMI FL 33131 | | | | 28TI | 100 SE 2ND STREET 28TH FLOOR MIAMI FL 33131 | | | | , | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/27/1995 | | | | | |
|--|---|-----------------|-----------------------------------|----------------|---|-------------|-----------------|---|--|---|---------------------------------------|--------------------------------|----------------------------|--|--|
| 2. Principal Place of Business | | | | | 28. Mading Address | | | | | 4. FEI Number | | +- | pplied For | | |
| Suite, Apt. #, etc. | | | | | Suite, Apt. #, etc. | | | | | 65-0578932 | | | ot Applicable | | |
| 22 | | | | 27 | 1 1 | | | | | 5. Certificate of Status Des | ired 🔲 | • | Additional equired | | |
| 23 | City & Slate | | | 28 | · | | | | | 6. Election Campaign Finar Trust Fund Contribution | , , , , , , , , , , , , , , , , , , , | | | | |
| | Zip | Country | | | Zip Country | | | 1 | 8. This corporation owes or has paid the current year intangible | | | | | | |
| 25 9, Name and Address of Current | | | | | 29 30 | | | | | Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent | | | | | |
| | | | | | | | | | 81 Name | | | | | | |
| 1401 BRICKELL AVE | | | | | | | | | | <u> </u> | | | | | |
| SUITE 700 | | | | | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | | | |
| MIAMI FL 33131 | | | | | | | | | | | | | | | |
| | | , , _ , , , | | | | | 84 | City | | | | 85 Zip | Code | | |
| 44 | Discount to | the provisi | oon of Costings CO7 OF | 00 ppd 007 | 1/ 00 Fisside Ctat | dos the | | | al sersoro | Nice automite this statement | F | | | | |
| Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-nam office or registered agent, or both, in the State of Florida. Such change was authorized by the c agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes | | | | | | | | | | ition subtrints this statement it is board of directors. I hereb | for the purpose by accept the a | por changing r pointment as | registered registered | | |
| | • | lamiliar wit | h, and accept the oblig | jations of, S | lection 607.0505, F | Ilorida Sta | atutes | 3 | | | | | | | |
| SIGNATURE Signature, typed or pented back of registered agent and two it applicable. (NOTI Registered | | | | | | | | | ure required w | then reinstating) | DATE | | | | |
| 12. | | | OFFICERS AN | | | 13. | | | | ADDITIONS/CHANGES TO | | ND DIRECTOR | RS IN 12 | | |
| TITLE | | DVST | | | ☐ DELETE | | 1.1 1ITLE | | | | · | Change | Addition | | |
| NAMI | | KOSNITZ | KY, MICHAEL | | | 1.21 | NAME | | | | | | | | |
| STRE | STREET ADDRESS 100 SE 2ND ST., 28 FLOOR | | | | 1.3 Sf | | STREET | REET ADDRESS | | | | | | | |
| CITY | SY-ZIP | <u>miami</u> fl | . 33131 | | | 1.4 (| CITY - S | T-ZIP | | | | | | | |
| TITLE | | DVP | | | ☐ DELETE | 2.11 | TITLE | | 1 | | | Change | Addition | | |
| NAMI | : | ZACK, STEPHEN N | | | 2.2 N/ | | NAME | | | | | | | | |
| STRE | TREET ADDRESS 100 SE 2ND ST., 28 FLOOR | | | | 23\$ | | | 3 STREET ADDRESS | | | | | 1 | | |
| _ | | MIAMI FL | . 33131 | | | | CITY - S | ST-ZIP | - | | | | Note: Control | | |
| TITLE | | DVP | | | DELÉTE | 311 | | | 11210 | P | _ | Change | Addition | | |
| NAM | | | WILLIAM J JR. | | | | MAME | | Ja | y Steinmand SE and S | 30 ~ | · - | ′ | | |
| | ET ADDRESS | | ND ST., 28 FLOOR | | | | | ADDRESS | s 100 | 58,37d > | c > c > c | 3 1 | j | | |
| _ | | MIAMI FL | . 33131 | | DELETE | | CITY-S | T-ZIP | $\perp m$ | hami, re = | 3 3 (3/ | Choose | Addition | | |
| TITLE | | D/P | ONE DEDDA W | | DECEIE | 4.11 | | | | | | L. Change | L_1 Addition | | |
| NAMI | ſ | | one, debra w End St., 28 Floor | | | | NAME | 100000 | . | | | | ! | | |
| | ET ADDRESS | MIAMI FL | | | | | | ADDRESS | 8 | | | | | | |
| TITLE | | DVP | . 33 13 1 | | DELETE | | CITY-S TITLE | I - ZIP | + | | | Change | Addition | | |
| NAME | | | STEDHEN | | C. Occor | | NAME | | İ | | | orange | | | |
| NAME RASH, H STEPHEN STREET ADDRESS 100 SE 2ND ST 28TH FLOOR | | | R | | 5.3 STR | | ADDRESS | , | | | | | | | |
| | | MIAMI FL | | • | | | CITY - S | | ´ | | | | ļ | | |
| TITLE | | TATIL MAIN F | | | DELETE | | 1111E | 1 20 | | | | Change | Addition | | |
| NAM | i | | | | | | NAME | | 1 | | | _ * | | | |
| | ET ADDRESS | | | | | | | ADDRESS | s | | | | | | |
| CITY-ST-ZIP | | | | | . 1 | | DITY - S | | - | | | | | | |
| | | tify that the | information supplied v | vith this film | o does not qualify | | | | ated in Sec | ction 119.07(3)(i), Florida Sta | dutes Lfurther | certify that the | information | | |

supplemental annual report is flut and accurate and that my signature shall have the same legal effect as if made under oath; that I am an in or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in or or an attachment with an artiress.

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