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

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2655 LE JEUNE ROAD 2655 LE JEUNE ROAD										
#500 #500										
0	ORAL GABLES	FL 33134		CORAL GABLI	CORAL GABLES FL 33134			DO NOT WRITE IN THIS SPACE		
İ								3. Date Incorporated or Qualified		
2	Principal Place	of Busines	e	2a. Mailing Ad	drane			04/28/1995 4. FEI Number		
21	Timoipai Tidoc	o or boomica	•	26				65-0602986	<u> </u>	Applied For Not Applicable
-11	Sulte, Apt. #, etc.			Suite, Apt. #, etc.					\$8.7	5 Additional
22	22			27	27			5. Certificate of Status Desired		Required
	City & State			City & State				6. Election Campaign Financing	\$5.0	0 May Be
23				28				Trust Fund Contribution		ed to Fees
_	Zip	\vdash	Country	Zip	<u> </u>	Country		8. This corporation owes or has pa	— ′	_ ~
24		25	d Address of Curren	29		10		Personal Property Tax due June		□ No
_			·	it Hegistered Agent		81	Name	10. Name and Address of New Re	egistered Agent	· · · · · ·
		, BLANCA		s ex Rado S	4 .		Nante			
1010 2510 40 0111251						82	Street Add	ress (P.O. Box Number is Not Acceptal	ble)	
CORAL GABLES FL 33134						83				
						84	City		FL 85 Z	ip Code
11.	Pursuant to th	e provisions	of Sections 607.050	2 and 607.1508, Flor	rida Statutos	the above	-named corp	poration submits this statement for the	aurocco of observin	g its registered
	agent. I am fa	amiliar with,	, or b oth, in the State an d a ccept the obliga	of Florida. Such cha ations of, Section 60	inge was aut 7.05 <mark>05</mark> , Florid	inorizea by da Statutos	rthe corporal i.	tion's board of directors. I hereby acce	pt the appointment	as registered
SIC	SNATURE									
-45		ature, typed or pi	inted name of registered age		(NOTE: F	· T	nt signature requir	red when reinstating)	DATE	
12. Titl			OFFICERS AND		DELET E	13.	··	ADDITIONS/CHANGES TO OFFIC		
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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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on amplitachment with an address

6.4 CITY - ST - ZIP

2-098

305-441-0506

FILED

Feb 18 1998 8:00am

Secretary of State