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 # P95000040129 (5)

PRIVSOUTH ENTERPRISES, INC.

FILED Apr 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						1684/851 118 10101 31111 31111 20111 31111 41511 31111 41511 31111 11010 11010 11010 1011 1051
5960 SW 57TH AVE 5960 SW 57TH AVE MIAMI FL 33143 MIAMI FL 33143						
MIAMI FL 331	43	MIAMI FL 331	143			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 05/22/1995
2. Principal Pi	ace of Business	2a. Mailing Ac	Idress			4. FEI Number Applied For
21		26				65-0587363 Not Applicable
Sulte, Apt.	#. etc.	Suite, Apt.	#. etc.			\$8.75 Additional
22		27	.,			5. Certificate of Status Desired Fee Regulred
City & State	9	City & Stat	0		·····	Election Cempaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	C	ountry	<i>;</i>	8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. 10 Yes No
	9. Name and Address of Cur			П		10. Name and Address of New Registered Agent
SC	H REIB ER, GERHARDT A			81	Name	
	S DIXIE HIGHWAY			62	Street A	Address (D.O. Poy Alumber is Not Aggentable)
	RAL GABLES FL 33146			02	Street	Address (P.O. Box Number is Not Acceptable)
				83		, <u>, , , , , , , , , , , , , , , , , , </u>
				L		
				84	City	FL 85 Zip-Code
11. Pursuant i	to the provisions of Sections 607.0	0502 and 607, 1508, Fig	orida Statutes, the	abov	e-named (corporation submits this statement for the purpose of changing its registered
office or re	egistered agent, or both, in the St m familiar with, and accept the ob	ate of Florida. Such ch	ange was authorize	zed b	y the corp	poration's board of directors. I hereby accept the appointment as registered
	in tanillar with, and accept the or	ingations or, section of	27.0303, Florida 3	iaiuie	5.	
SIGNATURE	Signature, typed or printed name of registered	agent and little if applicable	(NOTE Repiste	red Age	ent signature i	required when reinstating) DATE
12,	- 	AND DIRECTORS	T 1:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PO		DELETE 1.1	TITLE		Change Addition
NAME	a lvarez, julio e		1.2	NAME		•
STREET ADDRESS	3211 ALAHAMBRA CIR		1.3	STREET	ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL 33134		1.4	CITY-5	ST - ZIP	
TITLE	\$D			TITLE		Change Addition
NAME	WOLFBERG, DAVID A		2.2	NAME		
STREET ADDRESS	13500 S.W. 66TH AVE		2.3	STREET	ADDRESS	
CATY-ST-ZIP	MIAMI FL 33156			4 CITY -		
TITLE				TITLE		☐ Change ☐ Addition
NAME			3.2	NAME		·
STREET ADDRESS			III°		ADDRESS	
CITY-ST-ZIP				CITY-		,
TITLE				TITLE	S. E.	Change Addition
NAME				2 NAME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				CITY-S		
TITLE				TITLE	11-ZIT	☐ Change ☐ Addition
NAME				NAME		
STREET ADDRESS					ADDRESS	
					- 1	
CITY-ST-ZIP TITLE	<u></u>	П		CITY-S	51 - ZIP	Change Addition
		ب				Change Mounton
NAME				NAME	I DDDCCC	
STREET ADDRESS		1			ADDRESS	
CITY-ST-ZIP		1,	6.4	CITY-S	T-ZIP	

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 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 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 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 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 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 in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certificated in Section 119.07(3)(i), Florida Statutes. I further certificated in Section 119.07(3)(i), Florida Statutes. I furthe