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

Mailing Address
701 BRICKELL AVENUE

MIAMI FL 33131-2851

2a. Mailing Address

City & State

Suite, Apt. #, etc.

SUITE 850

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PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

701 BRICKELL AVENUE SUITE 850

MIAMI FL 33131

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23

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Zip



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000051599 (5)

Country

g. Name and Address of Current Registered Agent

25

SULLIVAN, JOHN S 701 BRICKELL AVENUE

SUITE 1600 (RFH)

MIAMI FL 33131

KINGSTOWN INVESTMENTS, INC.

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/03/1995 4. FEI Number Applied For 65-0600053 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes **⊠** No

10. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

FILED

Apr 24 1998 8:00am

Secretary of State

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 Stato of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, but hereby accept the appointment as registered agent.

Country

B1 Name

B2

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SIGNATURE	Stynature, typod or printed name of registered agent and title if applic	- CICIT			DAYE	
12.	OFFICERS AND DIRECTORS		Risgistered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECT			S IN 12
TOTLE	D	DELETE	1.1 TITLE	ADDITIONS/OFIANGES TO OFFICER	Change	Addition
NAME	KREISS, ANN		1.2 NAME			- Addition
STREET ADDRESS	701 BRICKELL AVENUE, SUITE 850		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP			
TITLE	PST	DELETE	2.1 TITLE		Change	Addition
NAME	KREIS, ANN		2.2 NAME			
STREET ADDRESS	701 BRICKELL AVENUE, SUTIE 850		2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP			
TITLE	INDIANA C	DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP			
TITLE		DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME		onango	
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.3 STREET ADURESS			

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 12 or Block 13 if changes or on an attachment with an address.

1 01 Ann Kreis, Preident

CICNIATURE

CR2E034 (10/9)

nril 7. 1999 (205) 201 c