## 5-22-98 B 7811 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # P95000061778 (3)

## FILED May 22 1998 8:00am Secretary of State

DOCUMENT # THE OFFICE ALTERNATIVE CORP. Principal Place of Business Mailing Address 3191 CORAL WAY 3191 CORAL WAY **STE 115 STE 115** MIAMI FL 33145 MIAMI FL 33145 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/10/1995 4, FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For NOT APPLICABLE 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Zip Country Country Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GOMEZ. RENE EDMUNDO R. COMET Address (P.O. Box Number is Not Acceptable) 3191 CORAL WAY 82 **STE 115** 3191 COPAL WAT **MIAMI FL 33145** 83 84 MIAMI 11. Pursuant to the provision of Serious 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 truth, in the Statute of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the objection 607 0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. **DELETE** D1266Ta2 Change TITLE 1.1 TITLE EDMUNDO R. GOMEZ GOMEZ, RENE NAME 1.2 NAME 3191 CORAL WAY, #115 3191 CORAL WAY STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33145 FL 3**3/4**5 CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-7IP DELETE Change Addition 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIF Change DELETE 5.1 TITLE Addition TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 62 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST- ZIP CITY-ST-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 aimual 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 truetce 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 one in all achievent with an address.

SIGNATURE:

mb K. Sing C

4-30-98