## 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

**FILED** Apr 20 1998 8:00am Secretary of State

1. Corporation Name # P95000061952 (4)					
itn us	A, INC.				liði siðin jófni dilla liði síði
Principal Place	e of Business	Mailing Address		r spondde nig inigh nifti dusir ndiri dorni dash da	101 11010 10101 01110 (101 100)
3211 PONCE DE LEON BLVD. 3211 PONCE DE LEON BL			ELVD.		
SUITE 301 SUITE 301 CORAL GABLES FL 33134 CORAL GABLES FL 33134			4	DO NOT WRITE IN THIS SPACE	
CONAL GABLES PE 35134			•	3. Date Incorporated or Qualified	
				08/08/1995	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
		26		65-0600669	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		City & State		6 Florian Commiss Financias	
23	•	28		B. Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	rrent year Intangible
24	25		30		Yes No
g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
RODRIGUEZ, MANUEL A 81 Name Rex M. Barker					
	1 PONCE DE LEON BLVD.		82 Street A	ddress (P.O. Box Number is Not Acceptable)	4/ 201
	TE 301		83 204	TOTICE OU HOW BILDE	#301
100	RAL GABLES FL 33134				
	*	,	84 000	4 GODIES FL	85 Zip Code 33/3 K
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 State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	M. M. Bul	SEX	DALKEL	, 4/3	3/98
Signature, lysed to collect a state of the property and time in applicable (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.					
12.	n OFFICENS AIN	DELETE	13.	D D S T	Change Addition
NAME	RODRIGUEZ, MANUEL A		1.2 NAME	To an al Milton	
STREET ADDRESS	TREET ADDRESS % 3211 PONCE DE LEON BLVD. SUITE 301		1.3 STREET ADDRESS	Joseph Milton Blad 3211 Ponce de Leon Blad	1 Suite 301
CITY-ST-ZIP	<b>CORAL GABLES FL 33134</b>		1.4 CITY - ST - ZiP	Coral Gables . Fl. 3313	34
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		D Severe	2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME OTOTE ADDRESS			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-S1-ZIP 4.1 TITLE		Change Addition
NAME			4. 2 NAME		C Production
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		
STREET ADDRESS		∩ <i> </i>	6 3 STREET ADDRESS		
CITY-ST-ZIP	ertify that the information supplied v	vith this thing does not qualify fo	6.4 CITY-ST-ZIP	Lin Section 119.07(3)(i). Florida Statutes, Lifurther of	ertify that the information

indicated on this annual report or supplied with this ping does not quality for the exemption stated in section 1 19.07(5)(i), Florida Statutes. Further certify that the information indicated on this annual report or suppliemental argunal 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 of the roceival of fusion that I am an officer or director of the corporation of the roceival of fusions in Block 12 or Block 13 if changed, or on an attachment with an address.