

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

FILED
Mar 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P95000062185 (0)

1. Corporation Name
YADEL HOLDING COMPANY, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business		Mailing Address	
5151 SW 61ST AVE BISCAYNE BUILDING DAVIE FL 33314 US		19 WEST FLAGLER STREET, SUITE 416 BISCAYNE BUILDING MIAMI FL 33130	
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	65-0628900	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	<input checked="" type="checkbox"/>	\$5.00 May Be Added to Fees
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>
23	28	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
Zip	Zip	<input type="checkbox"/> Yes <input type="checkbox"/> No	
24	29	30	
Country	Country	USA	

3. Date Incorporated or Qualified
08/11/1995

4. FEI Number
65-0628900

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

METSCH, BENJAMIN R
 19 WEST FLAGLER STREET, SUITE 416
 BISCAYNE BUILDING
 MIAMI FL 33130

10. Name and Address of New Registered Agent

81 Name
Keith T. Grumer, Esq.

82 Street Address (P.O. Box Number is Not Acceptable)
One East Broward Blvd.

83
Suite 1705

84 City
Ft. Lauderdale

85 Zip Code
FL 33301

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: *[Signature]* DATE: **2/24/98**

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	EICHLER, SUSAN	
STREET ADDRESS	19 WEST FLAGLER STREET, SUITE 416	
CITY-ST-ZIP	MIAMI FL 33130	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	STERN, RONNIE	
STREET ADDRESS	19 WEST FLAGLER STREET, SUITE 416	
CITY-ST-ZIP	MIAMI FL 33130	
TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	EICHLER, HENRY	
STREET ADDRESS	19 WEST FLAGLER STREET, SUITE 416	
CITY-ST-ZIP	MIAMI FL 33130	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VP & Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Susan Eichler	
1.3 STREET ADDRESS	5151 SW 61st Avenue	
1.4 CITY-ST-ZIP	Davie FL 33314	
2.1 TITLE	Pres. & Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Lucy Eichler	
2.3 STREET ADDRESS	5151 SW 61st Avenue	
2.4 CITY-ST-ZIP	Davie FL 33314	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 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 changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: **(954) 791-8881**

CR2E034 (10/97)