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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 15 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000062345 (0)

EXPONENTIAL INVESTMENT CORP.

Principal Place of Business Mailing Address 168 SE 1 ST P.O BOX 110223 704 MIAMI FL 33131 US 2. Principal Place of Business 2. Principal Place of Business 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State City & State						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/14/1995 4. FEI Number Applied For 65-0602919 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing \$5.00 May Be
23		28	28			Trust Fund Contribution
—, Zip —,	Country	Zip	Cou	ntry		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. 🔀 Yes 🗌 No
	9. Name and Address of Currer	it Registered Agent		81 1		10. Name and Address of New Registered Agent
	HN, DONALD J			۱ ۱	Name	8
317 71ST STREET				82 Street Address (P.O. Box Number is Not Acceptable)		
MIA	MIBEAFH FL 33141		83			
				63		
			1	84 (City	85 Zip Code
44 -						FL The statement for the purpose of changing its registered
SIGNATURE	m familiar with, and accept the oblig. Signature, typed or printed name of registered agr	rit and title II applicable (NOT			signature	ure required when reinstehing) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AN	DELETE	1.1 111	1 5		PVTSD
TITLE NAME	vtsd Shermen, Alan J		1.1 III			SHERMAN, ALAN J
STREET ADDRESS	168 SE 1ST #704			ME REET AD	norce	
	MIAMI FL			Y-ST-2		MIAMI, PL 33131
CITY-ST-ZIP TITLE	P	DELETE	2.1 7/7			Change Addition
NAME	SHERMEN, THELMA		2.2 NAME			
STREET ADDRESS	168 SE 1ST #704			REET AD	ORESS	
CITY-ST-ZIP	MIAMI FL			TY-ST-	-	
TITLE	1112 4111 1 1	DELETE	3.1 TIT			Change Addition
NAME			3.2 NA	ME		
STREET ADDRESS			3.3 ST	REET AD	DRESS	;
CITY-ST-ZIP			3.4. CI	TY-ST-	ZIP	
TITLE		☐ DELETE	4.1 TIT			Change Addition
NAME			4. 2 NA	ME		
STREET ADDRESS			4.3 STI	REET AD	DRESS	;
CITY-ST-ZIP			4.4 CIT	Y-ST-Z	P	
TITLE		☐ DELETE	5.1 TIT	LE		Change Addition
NAME			5.2 NA	ME	[
STREET ADDRESS			5.3 STI	REET AD	DRESS	;
CITY-ST-ZIP				Y-ST-Z	1P	
TITLE		DELETE	6.1 T(T		į	Change Addition
NAME			6.2 NA			
STREET ADDRESS				REET ADI		
CITY-ST-ZIP	and the short shor	on this film was a second of		Y-ST-Z		tool in Continue 440 07/0/0) Florida Chaldren I forther and the Art of the Ar
indicated of officer or of	on this annual report or supplementa	I annual report is true and acc eiver or trustee empowered to	curate and	l that r	my sig	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ignature shall have the same legal effect as if made under oath; that I am an as required by Chapter 607, Florida Statutes; and that my name appears in

ALAN

JEFF SHECMAN

4-9-98

2052750720