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

DOCUMENT # 1. Corporation Name P95000067206 (9)

FILED Mar 27 1998 8:00am Secretary of State

BODY	r ROCK /	AEH	OBICS, INC.											
Debated Description											1			
Principal Place of Business Mailing Address											ĺ			
221 W. HALLANDALE BEACH BLVD. 221 W. HALLANDALE BE/ HALLANDALE FL 33009 HALLANDALE FL 33009								ICH BLVD.						
											DO NOT WRITE IN THIS SPACE			
											3.	Date Incorporated or Qualified		
2. Principal Place of Business 2a, Mailing Address												08/30/1995 FEI Number		antiad For
21	IACO O: DOS	11000			26						٦.	65-0615017		pplied For ot Applicable
Suite, Apt.	# etc			20	Suite, Apt. #, etc.						-			Additional
22					27						5.	. Certificate of Status Desired		equired
City & State					City & State						6.	Election Campaign Financing		May Be
23				28	28							Trust Fund Contribution		to Fees
Zip			Country	— — — — — — — — — — — — — — — — — — —			Country			6.	This corporation owes or has paid the curre		tangible ☐ No	
24	o Name	25	Address of Curre	29	torod A	oent	30	 -			10	Personal Property Tax due June 30. Name and Address of New Registered A		
			Addition of Call	one mogra	negistered Agent				81 Name			, Italia Bila Addissa Ci Itaw Negjetaleo A	2011	
SMITH, TAIT 221 W. HALLANDALE BEACH BLVD.											75	DO De Marcher (a Net Assertable)		
HALLANDALE FL 33009								82 Street Addre			55 (P	P.O. Box Number is Not Acceptable)		
								83						
								84	Cit	у		FL	85 Zip	Code
11. Pursuant	to the provis	sions	of Sections 607.09	02 and 6	07.1508	, Florida Stati	utes, the	above	l e-nar	ned corpo	ratio		hanging i	ts registered
office or r	registered a	gent.	or both, in the Sta	le of Flori	da. Such	n change was	s authoriz Florida Si	ed by	y the	corporatio	n's b	on submits this statement for the purpose of board of directors. I hereby accept the appo	intment as	registered
			er decept the offi	gano-is o	, 000,10		nonda o	uidio	•					
SIGNATURE	Signature, lyped	tor par	illed name of registered a	gent and title	if applicab	ic (NC	OTE Registe	red Age	ent sign	nature required	l when	n reinstating) DATE	 	
Y2.			OFFICERS A	ND DIREC	CIORS		13	J.			- /	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	R\$ IN 12
TITLE	P					☐ DELETE	1.1	TITLE					Change	Addition
NAME	SMITH							1.2 NAME						
STREET ADDRESS 221 W HALLNADALE BEAC					1 BLVD			1.3 STREET ADDRESS					-	
CITY-ST-ZIP	HALL	AND/	LLE FL					1.4 CITY-ST-ZIP						
TITLE	-					DELET e	2.1	TITLE				•	Change	Addition
NAME						2.2			2.2 NAME			•		1
STREET ADDRESS						2.3 ST			2.3 STREET ADDRESS					İ
CITY-ST-ZIP					DELETE			2. 4 CIFY - ST - ZIP						
TITLE						3.1	3.1 TITLE					Change	Addition	
NAME					3.2			3.2 NAME						
STREET ADDRESS							3.3	STREET	ADDRE	ESS				j
CITY-ST-ZIP								3.4. CITY-ST-ZIP				<u> </u>	7	
TITLE						DELETE		TITLE				L	Change	Addition
NAME							4.2	NAME						
STREET ADDRESS							4.3	STREET	ADDRE	ESS				
CITY-ST-ZIP						D DCI CTC		CITY-S	T-ZIP			· · · · · · · · · · · · · · · · · · ·	70	T said
TITLE	1					DELETE	1	TITLE				ι	Change	☐ Addition
NAME								NAME						
STREET ADDRESS							1	STREET		SS				
CITY-ST-ZIP	ļ <u></u>					DELETE	_	CITY-S	T - ZIP			· · · · · · · · · · · · · · · · · · ·	Chapas	Addition
TITLE						DELETE		TITLE				ı	Change	☐ Addition
NAME								NAME						
STREET ADDRESS							- 1	6.3 STREET ADDRESS 6.4 City - St - Zip						
CITY+ST-ZIP	L					<u></u>	6.4	CHY-S	I - ZIP	L				

14. Thereby 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 suppliemental 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 cooperation or the receipter 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.