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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE # Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1**9**98 DOCUMENT #

P95000075885 (0)

FILED Jun 30 1998 8:00am Secretary of State

Principal Place of Businoss 257 HENRY AVENUE MELBOURNE FL 2204 MELBOURNE FL 2200 DD NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/03/1995 4. FEI Number Applied Fc 59-3337230 Addition Fee Required Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 29 Country 20 Country 20 Country 21 Country 22 30 Country 30 Country 4. This corporation owes or has paid the current year latangible Personal Proporty Tax due June 30. Yes West State 28 Added to Fees Added to Fees Added to Fees 10. Name and Address of New Registered Agent AMERIAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134 84 City FL S Street Address (P.O. Box Number is Not Acceptable) SIGNATURE Signature with, sent or purished rows of Fig. And of the objections of Sections 607,0502 and 607,1508. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, sent or purished rows of Property suited rows of Fig. And of the organization's board of directors. I hereby accept the appointment as register agent. I am familiar with, sent or purished rows of Fig. And of the Corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, sent or purished rows of Fig. And of the Corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, sent or purished rows of Fig. And of the Corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, sent or purished rows of Fig. And of the Corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, sent or purished rows of Fig. And of the Corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, sent or purished rows of Fig. And of the Corporation's board of directors. I	11
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Personal Property Tax due June 30. Yes No Name and Address of Current Registered Agent AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134 82 Street Address (P.O. Box Number is Not Acceptable) FL 85 Zip Code 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 register of 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 register agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE Signature, type for public frame of registered agent and bife of applicable (NOTE-Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PO DELETE 1.1 TITLE 1.2 Corporation and Address of New Registered Agent Address of New Registered Address of New Registered Address of New Registered Address of New Registered Address of New Reg	
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14. 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, more an attraction of with an address.