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 #	P95000079131	(5)

rincipal Place of Business	Mailing Address
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FILED Jan 20 1998 8:00am Secretary of State

TIFFAN	Y OF MIAMI, INC.				
Principal Plac	e of Business	Mailing Address			(# }#\U\ U\ U\ U\ U\
2602 N.W. 5TI	H AVENUE	2602 N.W. 5TH AVENUE			
MIAMI FL 331		MIAMI FL 33127		DO NOT WRITE IN THIS	CDACE
				3. Date Incorporated or Qualified	SPACE
				10/16/1995	,
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0620039	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		3. Continuate of States Besiled	Fee Required
City & Stat	10	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	7(p)	Country	3 rust Fund Contribution	Added to Fees
24	25	29	30	 This corporation owes or has paid the cu Personal Property Tax due June 30. 	irrent year Inlangible ☑ Yes ☐ No
	9. Name and Address of Curre		1301	10. Name and Address of New Registered	——————————————————————————————————————
~V111	I, HI O		81 Name	h 11)
	i, iii 0 i70' NW 5 S T REET ,		B2 Street A		l
	MBROKE CREEK FL 33026		102	oddress (P.O. Box Nymber is Not Acceptable)	
,	MDNONE CHEEK I'E GOOLG		63		
			84 City		Total 75 Conto
			D.e.	nbulle pines FL	- 85 Zip Codo 6
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statul	os, the above-hamed a	corporation submits this statement for the nurnose of	of changing its registered
office or r agent. I a	registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change was jations of, Section 607.0505, FI	authorized by the corp. orida Statutes.	oration's board of directors. I hereby accept the an	pointment as registered
SIGNATURE	@ Heeren	A 0			777
	Signature, typod or pij jed name o registered ag		E. Rogistered Agent signature i		
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	-PD	DETELE	1.1 HTLE		Change Addition
NAME	+ YU; HI O →		1.2 NAME		
STREET ADDRESS	-10170 N.W. 5TH ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	PEMBROKE-CREEK FL	DELETE	1.4 CHY+ST-ZIP 2.1 TITLE	n h	Change Addition
NAME	BAE, HEE YOUNG	L Officia	2.2 NAME	PD	My Other Ide
STREET ADDRESS	10827 NORTHWEST 3RD CO	LIRT	2.3 STREET ADDRESS		
CITY-ST-ZIP	PEMBROKE PINES FL 33026	OITI	2.4 CITY-ST-ZIP		
TITLE	TEMPHONE THICOTE GODES	DELETE	- 1	SP.	Change Addition
NAME		-	3.2 NAME	Bue, Kun woan 10827 NW 3rd et Pembrike Pines, 7	7
STREET ADDRESS			3.3 STREET ADDRESS	TORET NW 3rd et	
CITY-ST-ZIP			3.4. CITY+ST-ZIP	Dembrake Pines 7	L 33026
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CitY+St-ZiP		-
TITLE		☐ DELETE	5 1 1111.1		Change Addition
NAME			52 NAME		
STREET ADDRESS			5 3 STREFT ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
3(1)(E		DELETE	G.1 TIRLE		Change Addition
NAME			6.2 NAM[
STREET ADDRESS			6.3 STREET ADDRESS		ì
CITY-ST-ZIP	Landilla Alani	24 at 2 f 20 at 1 at 2 f 2 f	6.4 CITY - S1 - ZIP	Lie Carlier 110 07/0V/h Flatter City to 11	

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 trustoc 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.

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