

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

FILED

May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000085002 (0)

1. Corporation Name

ALERT ADVISORS, INC.



Principal Place of Business 1401 BRICKELL AVE., STE. 570 MIAMI FL 33131	Mailing Address 1401 BRICKELL AVE., STE. 570 MIAMI FL 33131
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1101 Brickell Ave Suite, Apt. #, etc. 22 601 - South Tower City & State 23 Miami FL Zip 24 33131		2a. Mailing Address 26 1101 Brickell Ave Suite, Apt. #, etc. 27 601 - South Tower City & State 28 Miami FL Zip 29 33131		3. Date Incorporated or Qualified 11/02/1995	
				4. FEI Number 65-0622776	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent PCLLAND, DEBORAH 1401 BRICKELL AVE., STE. 570 MIAMI FL 33131		10. Name and Address of New Registered Agent 81 Name Deborah Pelland 82 Street Address (P.O. Box Number is Not Acceptable) 1101 Brickell Ave 83 601 - South Tower 84 City Miami FL 85 Zip Code 33131	
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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

Deborah Pelland

(NOTE: Registered Agent signature required when reinstating)

4-13-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	
NAME	INTRIAGO, CHARLES	1.2 NAME	
STREET ADDRESS	1895 ESPANOLA DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL 33133	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	
NAME	INTRIAGO, JOY MEASON	2.2 NAME	
STREET ADDRESS	1895 ESPANOLA DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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:

Charles A. Intriago
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-98

305-530-0500

Date Daytime Phone # 0176276

CR2E034 (10/97)