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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 14 1998 8:00am

Secretary of State

Addition

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000087294 (1)

CLAYTON, DUNNING & COMPANY INC.

1	be of Business BAYSHORE DRIVE. #1E	Mailing Add 2901 SOUTI MIAMI FL 3	H BAYSHORE	DRIVE. #1E				
						DO NOT WRITE IN THIS S	PACE	
						3. Date Incorporated or Qualified		
2 Principal P	Place of Business	La Mailing	Addrone	· · · · · · · · · · · · · · · · · · ·		11/13/1995 4. FEI Number	1 1:	
21	lace of Business	2a. Mailing Address				1	Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				65-0634429	Not Applicable \$8.75 Additional	
22		27				5. Certificate of Status Desired	Fee Required	
City & Stat	0	City & State				6. Election Campaign Financing	\$5.00 May Be	
23		28				Trust Fund Contribution	Added to Fees	
Zip	Country	Zip		Country	1	B. This corporation owes or has paid the curr	ent year Intangible	
24	25	29		30		Personal Property Tax due June 30.	Yes No	
<u> </u>	9. Name and Address of Curr	ent Registered Age	ont		T	10. Name and Address of New Registered A	gent	
	u, robert c			81	Name			
2901 SOUTH BAYSHORE DRIVE, #1E MIAMI FL 33133				82	Street Add	dress (P.O. Box Number is Not Acceptable)		
				83				
				63				
				84	City	F°1	85 Zip Code	
11 Pursuant	to the provisions of Sections 607.0	502 and 607 1508 T	toricia Ctatutor	E the above	narrand cor	FL poration submits this statement for the purpose of		
office or r	egistered agent, or both, in the Sta	ite of Florida. Such d	:hange was au	ulhorized by	/ the corpora	tion's board of directors. I hereby accept the appo	cnanging its registered intment as registered	
ageni. i a	m familiar with, and accept the obl	igations of, Section (	607.05 <b>05</b> , Flor	ida Statutes	3.			
SIGNATURE	Signature, typod or prioted name of majisterod a	sugnition of the fit applicable	(NOIE	Registered Age	on signature requi	red when reinstating) DATE		
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE	D		DELETE	1.1 TITLE			Change Addition	
NAME	LAU, ROBERT C			1.2 NAME				
STREET ADDRESS	2901 SOUTH BAYSHORE D	RIVE, #1E		1.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33133			1.4 CITY - S	1-ZIP			
TITLE			DECETE	2.1 TITLE			Change Addition	
NAME				2.2 NAME				
STREET ADDRESS				2.3 STREET	ADDRESS			
CITY-ST-ZIP			<b>.</b>	2 4 CITY-S	S1 - ZIP			
TITLE		L	DELETE	3.1 TITLE			Change  Addition	
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREE1	ADDRESS			
CITY-ST-ZIP	<del></del>		05,576	3.4 CITY-5	IT-7IP			
TITLE		L	DECETE	4.1 TITLE	ĺ	ι	Change Addition	
NAME	1			4. 2 NAME				
STREET ADDRESS				4.3 STREET				
CITY-ST-ZIP TITLE		-···	DELETE	4.4 CITY- S	1 - 7IP		Dhanes 1 4 4400	
NAME	•	L.,	I WELETE	5.1 THILE	Ī	L	Change  Addition	
! !				5.2 NAME				
STREET ADDRESS				5.3 STREET	address			

6.4 CITY-ST-ZIP 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 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 altachment with an address.

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.1 TITLE

62 NAME

DELETE