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

PROFIT **CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000094067

RAHN ASSET MANAGEMENT INC.

Principal Place of Business	Mailing Address 450 East Las Olas BlvD. Suite 700 FT Lauderdale FL 33301 US		
450 EAST LAS OLAS BLVD. SUITE 700 FT LAUDERDALE FL 33301 US			
2. Principal Place of Business 21 1050 Lee Wagener Boulevard	2a. Mailing Address 26 1050 Lee Wagener Boulevard		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
22 Suite 301	27 Suite 301		
City & State	City & State		
23 Ft. Lauderdale, FL	28 Ft. Lauderdale, FL		
Zip Country	Zip Country		
24 33315 25 USA	29 33315 30 USA		

FILED Apr 29 1999 8:00 am Secretary of State



SUITE 700 FT LAUDERDALE FL 33301	SUITE 700 FT LAUDERDALE FL 33301		DO NOT WRITE IN THIS SPACE
US	US		3. Date Incorporated or Qualifed
2. Principal Place of Business	2a, Mailing Address		12/12/1995 4. FEI Number Applied For
21 1050 Lee Wagener Boulevard	26 1050 Lee Wage	ener Boule	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired [7] \$8.75 Additional
22 Suite 301	27 Suite 301		Fee Required
City & State	City & State		6. Election Campaign Financing (1) \$5.00 May Be
23 Ft. Lauderdale, FL	28 Ft. Lauderda		Trust Fund Contribution Added to Fees
Zip Country	Z _{ip}	Country	8. This corporation owes the current year Intangible
24 33315 25 USA 9. Name and Address of Current	[29] 33315 [30	0 USA	Personal Property Tax [] Yes [] No 10. Name and Address of New Registered Agent
s, manie and Address of Current	registered Agent	81 Name	10. Name and Audiess of New Registered Agent
GARDINA, CAROL		Lawr	ence N. Rosen
450 EAST LAS OLAS BLVD			Address (P.O. Box Number is Not Acceptable) Aventura Boulevard
- SUITE 700		83	, Avencura Boulevard
FT LAUDERDALE FL 33301	<u> </u>	• · • · · · · · · · · · · · · · · · · ·	e 308
~ 11		84 City	rtura FL 85 Zip Code 33180
11. Pursuant to the provisions of Sections 607.05/12	nd 607.1508, Florida Statutes,	the above named	corporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered ence. N. Rosen. April 28, 1999
office or registrated agent, or both, in the State of agent/ I am Manuar with, and accept the could also	Florida, Such change was auth	orized by the corpo a Statutes	pration's board of directors. I hereby accept the appointment as registered.
SIGNATURE MUSEUM IT		Lawre	ence N. Rosen April 28, 1999
St rature, typed or printed name of registered agent a	and tille if applicable (NOTE: Re		quired when reinstating) DATE
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PO	(X) DELETE	1 1 TITLE	P [] Change [K] Addition
ANDERSON, JOHN H		1.2 NAME	David Ross
STREET ADDRESS 450 EAST LAS OLAS BLVD, SUF	IE 700	13STREET ADDRESS	6860 Lions Head Lane
CITY-ST-ZIP FT LAUDERDALE FL	⊠ DELETE	14 CITY-ST-ZiP	Boca Raton, Florida 33496
TITLE VD	(X) DELETE	21 TITLE	V/S/T [] Change X Addition
NAME ROBERTS, PETER H STREET ADDRESS 450 EAST LAS OLAS BLVD. SUIT	TC 700	2.2 NAME 2.3 STREET ADDRESS	Jeffrey M. Levine
CITY-ST-ZIP FT LAUDERDALE FL	IE 700	1	1050 Lee Wagener Boulevard, Suite 301 Ft. Lauderdale, FL 33315
TIRE VI	⊠ DELETE	2 4 CITY-ST-ZIP 3 1 TITLE	[]Change
NAME STIRK, ROBERT J		3 2 NAME	8000028665984
STREET ADDRESS 450 EAST LAS OLAS BLVD, SUIT	ΓE 700	33 STREET ADDRESS	-05/07/9901030~-017
CITY-ST-ZIP FT LAUDERDALE FL	12.00	34. CITY-ST-ZIP	***1200.00 ****150.00
TITLE	☐ DELETE	41 TITLE	Change Addition
NAME		4 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	☐ DELETE	5 1 TITLE	[] Change [] Addition
NAME		5 2 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CFTY-ST-ZiP		54 CITY+ST-2IP	
TITLE	☐ DELETE	6 1 TITLE	Change Addition
NAME		62 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	^ (\

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 for 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 a officer or director of the corporation or the receiver of 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 entary much with an address, with all other like empowered.

SIGNATURE:

David Ross OR DIRECTOR

April 28, 1999

(561)852-7100