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

DIVISION OF (2)

FILED May 06 1998 8:00am Secretary of State

1. Corporation	n Name	# P960 UBLISHING (0757 (8)			1 1001(81))(0 10110 2)(1) 2011(2011 2011) 2011)	iğir Berli saqar ar	ini (61) 160)
		· · · · · · · · · · · · · · · · · · ·						#	
Principal Place of Business Maiting Address							(1991) 601 (110 131) 6 31) (49/4) 62/1) 63/1) 63/10 63/10 44	217 40111 10001 21	11) 1 1 W 1 1 W 2
			O. BOX 143913 Oral Gables FL 3311			DO NOT WRITE IN THIS	S SPACE		
							3. Date Incorporated or Qualified		 -
							02/02/1996		
	Principal Place of Business 2a						4. FEI Number	<u> </u>	pplied For
21 26				Cuite Ant # etc			65-0752851		ot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.			5. Certificate of Status Desired	·	Additional equired
City & State	6		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	Country 25			Zip Country 30		<i>'</i>	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
	9, Name	and Address of	Current Regis	tered Agent	81		10. Name and Address of New Registered	i Agent	
FILINGS, INC.						Name			
3732 N.W. 16TH STREET FORT LAUDERDALE FL 33311					82	B2 Street Address (P.O. Box Number is Not Acceptable)			
101	ni Dauben	IDALE IL 3331	J		83				
					84	City	FI	85 Zip	Code
11, Pursuant	to the provis	ions of Sections 6	07.0502 and 6	07.1508, Florida Statul	es, the abov	e-named c			Its registered
office or r agent. I a	egistered ag m familiar wi	ent, or both, in th th, and accept th	 State of Florid obligations of 	da. Such change was f, Section 607.0505, FI	authorized by orida Statute	y the corpo s.	orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	pointment as	registered
SIGNATURE	Signature, typed	or printed name of regis	lered agent and time	if applicable (NO)	E Registered Ag	ent signature re	quired when reinstating} DATE		
12.	OFFICERS AN			70	13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	RS IN 12
TITLE	0			☐ DELETE		ļ		Change	Addition [
NAME	SERES, RICHARD A			1.2 NAME 1.3 STREET ADOR					
1	STREET ADDRESS 2986 COCONUT AVENUE COCONUT GROVE FL 33133					ì			4
CITY-ST-ZIP TITLE	CUCUNI	JI GHUVE FL	3133	DELETE	1.4 CITY - S 2.1 TITLE	ST-ZIP		Change	Addition
NAME					2.2 NAME			C Chargo	
STREET ADDRESS	Annesses				2.3 STREET	ADORESS			ļ
CITY-ST-ZIP				2. 4 City-St-ZiP			₹ 1		}
TITLE				DELETE	3.1 TITLE			Change	Addition
NUME					3.2 NAME	į			ļ
STREET ADDRESS					3.3 STREET	ADDRESS			
CITY-ST-ZIP					3.4. CITY-	ST-ZIP			
TIFLE				☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME					4. 2 NAME				
STREET ADDRESS					4.3 STREET				i
CITY-ST-ZIP TITLE	<u></u>		····	DELETE	4.4 City - S 5.1 Title	51 - ZIP		Change	Addition
NAME				La becort	5.2 NAME	}			
STREET ADDRESS					5.3 STREET	ADORESS			
CITY-ST-ZIP					5.4 CITY-S				\ \
TITLE				☐ DELETE	6.1 TITLE			Change	Addition
NAME					6.2 NAME				į
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 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 changing, or on an attachment with an address

SIGNATURE: 1) chay dem

28/98 305/442 9444