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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## 1998 DOCUMENT # P96000015795 (3) BILLIONAIRE, INCORPORATED

## FILED Jan 15 1998 8:00am Secretary of State

BILLIONAIRE, INCORPORATED					
•					
Principal Piace	of Puripose	Mailing Address			<b>0101</b>   1001   0111   1001   0112   0114   0144
Principal Place of Business 175 NORTHWEST 121ST STREET		_	ET STORET		
MIAMI FL 33168-4513		175 NORTHWEST 121ST STREET MIAMI FL 33168-4513			
				DO NOT WRITE IN  3. Date Incorporated or Qualified	THIS SPACE
				02/20/1996	
2. Principal Pl	ace of Business	28. Mailing Address		4. FEI Number	Applied For
21		26		65-0718420	Not Applicable
' Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	7 \$8.75 Additional
22 City & Ciato		27			Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<b>23</b> ] Zip	Country	7 <sub>(p</sub>	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Regist	ered Agent
	ERILAWYER CHARTERED		B1 Name		
	B ALMERIA AVENUE		82 Street Add	lress (P.O. Box Number is Not Acceptable)	<del></del>
CO	RAL GABLES FL 33134		83		
			84 City		B5 Zip Code
11. Pursuant t	o the provisions of Sections 607.05	02 and 607.1508, Florida Stati	utes, the above-named cor	poration submits this statement for the purp tion's board of directors. I hereby accept th	ose of changing its registered
office or re agent. I ar	e <b>gistered agent, or b</b> oth, in the State <b>n familiar with, and a</b> ccept the oblic	e of Horida. Such change was gations of, Section 607.0505, F	s authorized by the corpora Florida Statutes.	ation's board of directors. I hereby accept the	e appointment as registered
SIGNATURE .	, ,				
	Signature, typed or printed name of registered as		(31) Registered Agent signature requirements	aDDITIONS/CHANGES TO OFFICER	OATE
12.	PSTD OF FICE HS AP	VD DIRECTORS		PRESIDENT "DIRECTOR	Change Addition
NAME	EHRLICH, MICHAEL B		1.2 NAME	HREICH, MICHARL B.	2
STREET ADDRESS	175 NORTHWEST 121ST ST	REET	1.3 STREET ADDRESS	75 NW 121 STEELT	
CITY-ST-ZIP	MIAMI FL 33168-4513			1:14 M) FL. 33/68-45/3	
TITLE		DELETÉ	2.1 Tille	SECRETARY CHRLICH, BENNETTE M.	☐ Change ☐ Addition
NAME			2.2 NAME	HRLICH, UNDELLE, M.	
STREET ADDRESS				75 NW 121 STREET	
*BiTY-ST-ZiP		DECEMBER 1		11 Ani, FC 33168-4513	Change P Addition
STITLE		E" I MITH	3 1 1111 £	TREASURER HRCICH, RICHAPO	["] Ownde ["] Modinon
NAME STREET ADDRESS			3.3 STREET ADDRESS	75 NW 121 STREET	
CITY-ST-ZIP				11 AMi, FL. 33168 4515	
TITLE		DELETE	4.1 1111.6		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 \$TREE1 ADDRESS		
CITY-ST-ZIP			4.4 CITY - S1 - ZIP		
TITLE		DEFE TE	51 THLE		Change Addition
NAME			5.2 NAMÉ		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-\$T-ZIP		brire	5.4 C/1Y-S1-7/P		Change Addition
TITLE		L] DELETE	61 1111.6		FT change FT weapout
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	ertify that the information supplied y	with this filing does not qualify	for the exemption stated in	Section 119.07(3)(i), Florida Statutes, I furt	her certify that the information

4. 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 eath, that I am an officer 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 MYCROFI & FARTURE ME

TAN 2 Nº 1998

754-0985