## 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

DOCUMENT #

96000018222 (5)

Apr 21 1998 8:00am Secretary of State

**FILED** 

de	diknox, T	INC.						
Principal Place of Business Mailing Address						<del> </del>		
1734 SW 2ND AVENUE 1734 SW 2ND AVENUE					DO NOT WRITE IN THIS	SPACE		
MIAMI, FLORIDA 33129 MIAMI, FLORID					33129			
						02/28/96		
<del></del>	Place of Business	<u></u>	ig Address			4. FEI Number	A	pplied For
21		26				65-0761185	<del></del>	ot Applicable
Suite, Apt.		27	Apl. #, etc.			5. Certificate of Status Desired		Additional equired
City & Stat	te	City 8	State			Election Campaign Financing	\$5.00	May Be
23	<del></del>	28	· · · · · · · · · · · · · · · · · · ·			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	-	_ Countr	У	8. This corporation owes or has paid the cu		
24	25	[29]	3	0				J No
	9. Name and Address	of Current Registered	Agent		Name	10. Name and Address of New Registered	Agent	
				6		DDNEY MILLER		
CORPORATE CREATIONS ENTERPRISES 82 Street Address						Address (P.O. Box Number is Not Acceptable)		
452	1 PGA BLVD.,	# 211		83	1.7	734 SW 2ND AVENUE		
	M BEACH, FLO			83		IAMI, FLORIDA 33129		
				84			<b>85</b> Zip	Code
					L		<u>.     _ </u>	
11. Pursuant office or r	to the provisions of Scotlogs registered agont, or both, in	s 607 0502 and 607.150 the State of Florida, Suc	8. Florida Statutes hichange was aut	, the abov horized b	re-named i v the corp	corporation submits this statement for the purpose o poration's board of directors. I hereby accept the app	f changing i inintment as	ts registered registered
ageni. La	ım f <b>a</b> miliar wilk, anol/ic on	the obligations of, Section	on 607.0505, Florid	oa Statuto	S.	the second of th	on an one as	registered
SIGNATURE .	Stoneture live of 1 shipper of the of the					4/15/98		
12,		gistered agent zoot tipe it applica CERS AND DIRECTORS	LIF (NOTE F	togistered Ag	ent signature	required when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS AND	DIDECTO	20.11.10
TITLE		SENS AIVE DIRECTORS	DELETE	1.1 TITLE	·	D/P/S	Change	Addition
NAME	MILLER, RO	DNEY		1.2 NAME		MILLER, RODNEY	Onlingo	Z Addition
STREET ADDRESS	į į				1 ADDRESS	•		
CITY-ST-ZIP	1734 S.W.	2ND AVENUE		14 CiTy -:		1734 S.W. 2ND AVENUE		
TIFLE	MIAMI, FLO	RIDA-33129	DELETE	21 TITLE	21 - 28	-MIAMI, FLORIDA 33129	☐ Change	Addition
NAME				2 2 NAME			Change	La ricollian
STREET ADDRESS					T ADDRESS			ŀ
CITY-ST-ZIP				2.4 CITY-	- 1			
TITLE			☐ DELETE	3.1 TITLE	31 211		Change	Addition
NIME				3.2 NAME				
STREET ADDRESS				3 3 STREET	T ADDRESS			
CITY-ST-ZIP				3.4. CITY-				
TITLE			DELFTE	4.1 TITLE			☐ Change	Addition
NAME				4. 2 NAME				
STREET ADDRESS					ADDRESS			
CITY-ST47IP				4.4 CI1Y - S			n	ı
TITLE			DELETE	511016			Change	Addition
NAME Jr				5.2 NAME		$\mathcal{A}_{\ell}$	//_ //	/
STREET ADRESS				5.3 STREET	ADDRESS	$\mathcal{A}_{l}$	M []	' ) i
CITY-ST-ZIP				54 C-TY-5	- 1	1/9	17/	01
TITLE			DELETE	6171711		700002495	L havige	Addition
NAME				62 NAME		-04/22/9801009		
STREET ADDRESS				63 STREET	ADDRESS	***150.00		
CITY-ST-ZIP				6.4 CITY - S	i	<b></b>		

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 eath, 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 attenuent with an address.

SIGNATURE:

4/15/98

RZE034 (10/97)