## 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 # P96000020336 (9)

DB INV	ESTMENT HOLDINGS, INC.	•				
Principal Plac	e of Business	Mailing Address			I BERNE LIBNI BOIDE NICE MINE BAR 1881	
PENTHOUSE 5		2600 DOUGLAS ROAD PENTHOUSE 5 CORAL GABLES FL 3313	н	DO NOT WRITE	IN THIS SPACE	
OONAL ONGE	20 12 00101	COMME CADECO TE 5510	''	3. Date Incorporated or Qualified		
				03/01/1996		
2. Principal P	lace of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4, FEI Number	Applied For	
21		26	·····	65-0665676	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28	·	Trust Fund Contribution	Added to Fees	
Zip	Country	Z <sub>I</sub> p	Country	8. This corporation owes or has paid		
24	25	29	30	Personal Property Tax due June 3		
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent  EIGUED ANDREA E 81 Name					istered Agent	
FISHER, ANDREA F			SOUTH	SOUTH FLORIDA RESIDENT AGENTS, INC.		
1221 BRICKELL AVENUE			82 Street Adde	ress (P.O. Box Number is Not Acceptable UTH BISCAYNE BLVD.	9)	
SUITE 2100 MIAMI FL 33131			83	OIR DISCRINE DEVD.		
MIP	WII FE 33 13 1		SUITE	4750		
			84 City MIAMI		FL 85 Zip Code 33131	
11. Pursuant to the provisions of Socious 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered						
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, or the corporation is board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.						
SIGNATURE						
SIGNATORE	Signature, typed or printed have of registered age	on and tille dupped tille (NOT	Kanald Fregistered Agent signature require	red when reinstating)	DATE	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICE		
TITLE	D	XX DELINE	1,1 TITLE		Change Addition	
NAME	ROSALES, XAVIER E SR.		1.2 NAME			
STREET ADDRESS	2600 DOUGLAS ROAD	er.	1.3 STREET ADDRESS		Ų	
CITY-ST-ZIP	CORAL GABLES FL 33131	DELETE	1.4 CITY-ST-ZIP	<del></del>	Change Addition	
TITLE	PT CTC/TALT	L] DETER	2.1 TITLE		Change L Addition	
NAME	LEVITT, STEVEN T		2.2 NAME			
STREET ADDRESS	2600 DOUGLAS RD, PH5 CORAL GABLES FL		2.3 STREET ADDRESS			
CITY-ST-ZIP	DVS	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition	
NAME	ROSALES, X FRANCISCO	L. DECERT	3.2 NAME			
STREET ADDRESS	2600 DOUGLAS RD, PH5		3.3 STREET ADDRESS		Ì	
CITY-ST-ZIP	CORAL GABLES FL		3.4. CITY-ST-ZIP			
TITLE	JOINTE GIRCLES I E	DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME		_	4. 2 NAME		–	
STREET ADDRESS			4.3 STREET ADDRESS		}	
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS		}	
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 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 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 attriction with an address.

SIGNATURE:

X. FRANCISCO ROSALES

6.3 STREET ADDRESS

2/13/98

(305)461-2142

**FILED** 

Mar 10 1998 8:00am

Secretary of State