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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000022139

1. Corporation Name

Mar 25, 1999 8:00 am Secretary of State

03-25-1999 90036 050 ***150.00

Suite, Apt #, etc. Suite, Apt #, etc. Suite, Apt #, etc.	J. ELDER GROUP INC.				. 1881/1881 (18 1848 87) (1881/1881) 88/11 88/11 88/11			
### Applied For CORNE, GABLES FI. 33148 22 All All Column Flue provisions of Sections 807 (500) and 607 (150). Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered office or engineerial spent, or both in this State of Fluents Scholland. School and Column Sch	· .						 	
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City & State	- 001/19-01				65-0669366	60.7		
City & State					5. Certificate of Status Desired			
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Zip Country Zip Country Zip Country St. This corporation owes the current year Intangable Parannal Property Tax. Parannal Address of New Registered Agent Parannal Property Tax.					1			
9. Name and Address of Current Registered Agent ELDER, JOHN G 4221 AURORA STREET CORAL GABLES FL 33146 82 Street Address (P.O. Box Number is Not Acceptable) 83 Name 84 City FL 85 Zip Code 85 City FL 85 Zip Code 85 City FL 85 Zip Code 85 City FL 85 Zip Code 86 City FL 85 Zip Code 87 City FL 85 Zip Code 88 City FL 85 Zip Code 88 City FL 85 Zip Code 88 City FL 85 Zip Code 89 Zignature to the provisions of Sections 607,9502 and 607,1508, Fiorida Statutes, the above-named corporation autimits this statement for the purpose of changing lis registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes 810 Auror Signature 810 Auror Signature 811 Auror Signature 812 Auror Signature 813 Name 814 City FL 85 Zip Code 815 Zip Code 815 Zignature this statement for the purpose of changing lis registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes 810 Auror Signature 812 Auror Signature 813 Name 814 City FL 85 Zip Code 82 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 Date Transport to the provision of changing lis registered agent a								
9. Name and Address of Current Registered Agent ELDER, JOHN G 4221 AURORA STREET CORAL GABLES FL 33146 85 86 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obtaigations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obtaigations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obtaigations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed rame of implications of, Section 607.0505, Florida Statutes. INDIE Required Agent signature records when resentating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. PLEDER, JOHN STREET ADDRESS GRY-97.3P MIAMI FL 33135 DELETE 1 STREET ADDRESS 2 SOUTHWEST 3RD STREET 1 STREET ADDRESS 3 STREET ADDRESS 3 STREET ADDRESS CRY-97.3P MIAMI FL 33135 DELETE 2 STREET ADDRESS 3 STREET ADDRESS 3 STREET ADDRESS CRY-97.3P 1 DELETE 3 STREET ADDRESS 4 CRY-97.3P 1 DELETE 4 CRY-97.3P 1 DELETE 4 CRY-97.3P 1 DELETE 4 CRY-97.3P 1 DELETE 5 STREET ADDRESS 4 CRY-97.3P 4 C					1 .		No	
BLDER, JOHN G 4221 AURORA STREET 22 22 23 24 24 24 24 24			Т			Agent		
### 4221 AURORA STREET CORAL GABLES FL 33146 #### 211 The provisions of Sections 607.0502 and 607.1508, Floridal Statutes, but corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Floridal Statutes. #### SIGNATURE Signature, hyped or printed many of impatiend agent and the # replicable. (NOTE: Revaluate Additions) DATE	O. Hand did Hand of the same o		81	Name				
422T AURONA STREET CORAL GABLES FL 33146 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent are formation of the purpose of changing its registered of the corporation's board of directors. I hereby accept the appointment as registered agent are formation of the purpose of changing its registered agent are formation of the purpose of changing its registered agent are formation of the purpose of changing its registered agent are formation of the purpose of changing its registered agent are formation of the purpose of changing its registered agent are formation of the purpose of changing its registered agent are formation of the purpose of changing its registered agent are formation of the purpose of changing its registered agent are formation of the purpose of changing its registered agent are formation of the purpose of changing its registered agent are formation of the purpose of changing its registered agent are formation of the corporation's board of directors. I hereby accept the appointment as registered agent are registered as registered and the corporation's board of directors. I hereby accept the appointment as registered agent are registered as registered and the corporation's board of directors. I hereby accept the appointment as registered agent are registered as registered and the corporation's board of directors. I hereby accept the appointment as registered as registered and the corporation's board of directors. I hereby accept the appointment as registered and the corporation's board of directors. I hereby accept the appointment as registered and the corporation and the co	ELDER, JOHN G			Charact Address	(D.O. D., Number is Net Associable)			
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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 combination or the region 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 alaphment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZP