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P96000023282 (2)

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

KEN BRADLEY, P.A.

FILED Apr 21 1998 8:00am Secretary of State



Mailing Address Principal Place of Business 8240 MILLS DRIVE PO BOX 830426 MIAM! FL 33183 MIAMI FL 32283-0426 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/15/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0662416 P.O.Box 836777 Suite, Apt #, etc. Not Applicable 21 Suite, Apt #, etc \$8.75 Additional Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Miami, Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Ζφ Country Personal Property Tax due June 30 24 25 29 33283 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name GARCIA, CARLOS E C 11430 N KENDALL DR #225 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33176 Zip Code City 85 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 office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 TITE€ BRADLEY, KENNETH W 1.2 NAME NAME 8240 MILLS DRIVE 1.3 STREET ADDRESS STREET ADDRESS MIAM! FL 33183 CITY-ST-2IP 1.4 CITY-ST-ZIP Addition DELETE Change 2 1 TIT1 F 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Addition DELETE Change TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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 coport 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 of trustee empowered be execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with at address

SIGNATURE:

305-279-5081