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 # 1. Corporation Name P96000026809 (9)

PIRAEUS INVESTMENT CORP.

Principal Place of Business Mailing Address 9400 SO. DADELAND BLVD. STE 100 9400 SO. DADELAND BLVD. STE 100

FILED Mar 09 1998 8:00am Secretary of State



MIAMI FL 33156		MIAMI FL 33156						DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified			
								03/21/1996			
2. Principal Pl	lace of Business	2a. Mailing Address					4. FEI Number		Α	pplied For	
21		26					65-0660281			lot Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.					5. Certificate of Status Desire	ed 🔲		Additional	
22		City & State								lequired	
City & State			28					6. Election Campaign Finance Trust Fund Contribution	ing 🖂		May Be to Fees
Zip	Co	ountry	Zip		Cou	ntrv		8. This corporation owes or			
24	25	,	29		30	. ,		Personal Property Tax due			□ No
27	11	ddress of Current I		nt	1001			10. Name and Address of N		Agent	
GFI	LFAND, ELLIOTT	<u> </u>				81	Name				
9400 SO. DADELAND BLVD. STE 100						82	Street Ar	ddress (P.O. Box Number is Not Ac	ceptable)		
	MI FL 33156										
						83					
						84	City			85 Zip	Code
							•		<u>FL</u>		
11. Pursuant to office or reagent. Lar	to the provisions of egi s tered agent, or m familiar with, and	Sections 607.0502 a both, in the State of accept the obligation	and 607.1508, F Florida Such d ons of, Section 6	lorida Statu hange was 607.05 05 , Fl	tes, the at authorize: Iorida Stat	oove d by utes	named corpo	orporation submits this statement for ration's board of directors. I hereby	accept the app	r changing ointment a	s registered
SIGNATURE											
	Signature, typed or printed	name of registered agent a OFFICERS AND I		(NO.	TE: Registered	d Ape	nt signature re	quired when reinstating) ADDITIONS/CHANGES TO	DATE OFFICERS AND	DIRECTO	RS IN 12
12.	D	OFFICERS AND I		DELETE	1.1 TI	T) F	 1	ADDITIONS/CHANGES TO	OF TIOLING AND	Change	Addition
NAME	GELFAND, ELI	LIOTT J		DELETE	1.2 N						
STREET ADDRESS	9400 SO. DAD	F 100				ADDRESS				1	
CITY-ST-ZIP	MIAMI FL 331				TY-SI]	
TITLE	111111111111111111111111111111111111111			DELETE	2.1 TF			***************************************		Change	Addition
NAME					2.2 NA	AME					
STREET ADDRESS					2.3 \$1	REET	ADDRESS				-
CITY-ST-ZIP					2.40	tr-S	T-ZIP				
TITLE	·			DELETE	3.1 Ti	TLE				Change	☐ Addition
NAME					3.2 N/	AME					
STREET ADDRESS					3.3 ST	REET	ADDRESS				
CITY-ST-ZIP	<u></u>				3.4. C		IT- ZIP			—	
TITLE			[DELETE	4.1 10	TLE				☐ Change	Addition
NAME					4. 2 N	AME					
STREET ADDRESS					4.3 ST	REET	ADDRESS				
CITY-ST-ZIP				DELETE.	4.4 Cf		T-ZIP			Change	Addition
TITLE			L.	DELETE	5.1 Tr					L_1 Change	L AUGIRUII
NAME					5.2 NA						
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP			-	DELETE	5.4 CI		T-ZIP			Change	Addition
TITLE			L) DECENT	6.1 TI					ட பாரிச	L NOUROR
NAME					6.2 N/		1000000				
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP					6.4 01	1Y-S	1-7IP			of the state	

14. Thereby certify that the information supplied with this fitting 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 attachment with an address.