## 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

| •  | MENT # P9600<br>EXPERTS, INC.                   | 00033036 (0)  |   |                    |   | 1)  |
|--|---|---|---|--------------------|---|---|
| Principal Plac                                   | e of Business                                   | Mailing Address                                       |   |                    |   | LAN <b>BEHEN</b> MIND BILL I <b>nt</b> h                      |
| 9835 SUNSET DRIVE<br>SUITE 201<br>MIAMI FL 33173 |   | 9835 SUNSET DRIVE<br>SUITE 201<br>MIAMI FL 33173      |   |                    | DO NOT WRITE IN THIS SP   | 'ACE  |
|  |   |   |   |                    | 3. Date Incorporated or Qualified   |   |
|  |   |   |   |                    | 04/16/1996  |   |
| 2. Principal Place of Business 2e. Mailing Ad    |   |   |   |                    | 4. FEI Number   | Applied For   |
| 1 Suito Ant                                      | # oto   | 26 Suite, Apt. #, etc.                                |   |                    | 65-0658274  | Not Applicable  |
| Suite, Apt. #, etc.                              |   | 27  | 27                                      |                    | 6. Certificate of Status Desired  | \$8.75 Additional<br>Fee Required                             |
| 28   |   |   |   |                    | 6. Election Campaign Financing Trust Fund Contribution  | \$5.00 May Be<br>Added to Fees                                |
| Zip  | Country 25                                      | Zip 29  | Cour<br>30                              | itry               |   | Yes No  |
|  | 9. Name and Address of Cu<br>RTINEZ, ALEX V     | rrent Registered Agent                                |   | 81 Name            | 10. Name and Address of New Registered Ag   | ent   |
|  |   |   | es, the ab<br>authorized<br>orida Statu |                    | orporation submits this statement for the purpose of coration's board of directors. I hereby accept the appoint | 85 Zip Code<br>hanging its registered<br>htment as registered |
|  | Stgnature, typed or printed harne of ingistrici | 1 agent and title if applicable (NOT<br>AND DIRECTORS |   | Agent eignature re | equired when reinstating) DATE  | NIDEOTODO IN 10   |
| IZ.  | VPT   | DELETE  | 13.                                     |                    | ADDITIONS/CHANGES TO OFFICERS AND D   | Change Addition   |
| IAME   | ADRIANA C. MARTINEZ                             | LL DELETE   | 1.7 NA                                  |                    | <u></u>   | T change T change.  |
| TREET ADORESS                                    | 10410 SW 148 AVE.                               |   |   | EET AODRESS        |   |   |
| TTY-ST-ZIP                                       | MIAMI FL  |   |   | Y-ST-ZIP           |   |   |
| TITLE  | PCE   | DELETE  | 2.1 TITLE                               |                    |   | Change Addition   |
| VAME   | ALEX V. MARTINEZ                                |   | 2.2 NAM                                 | AE                 | •   |   |
| STREET ADDRESS                                   | 10410 SW 146 AVE.                               |   | 2.3 STR                                 | EET ADORESS        |   |   |
| CITY-ST-ZIP                                      | MIAMI FL  |   | 2.4 011                                 | Y-ST-ZIP           |   |   |
| ITLE   | \$  | ☐ DELETE  | 3.1 TITL                                | .E                 |   | Change Addition   |
| AME  | RICHARD D. TERRELONGE                           |   | 3.2 NA                                  | AE                 |   |   |
| STREET ADDRESS                                   | 9835 SUNSET DR., #201                           |   | 3.3 STR                                 | EET ADDRESS        |   |   |
| CITY-ST-ZIP                                      | MIAMI FL  | ·   |   | Y-ST-ZIP           |   |   |
| IITLE  |   | ☐ DELETE  | 4.1 TITE                                | .E                 | L   | Change . Addition   |
| NAME   |   |   | 4. 2 NA                                 |                    |   |   |
| TREET ADDRESS                                    |   |   | 4.3 STR                                 | EET ADDRESS        |   |   |
| CITY - ST . 71P                                  |   |   | 44.00                                   | 7. ST. 7IP         |   |   |

ng does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information peopl is true and accurate and that my signature shall have the same legal effect as if made under path; that I am an usled empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in titl an address.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

DELETE

DELETE

Change

Change

☐ Addition

Addition

**FILED** 

May 01 1998 8:00am

Secretary of State