## 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 # P96000038201 (5)

## FILED May 18 1998 8:00am Secretary of State

APPLI/	ance center youngs	TOWN, INC.			
Principal Piac	ce of Business	Mailing Address			FBC 411901 4E110 11611 09101 4401 1001
1400 N.W. 107TH AVENUE 1400 N.W. 107TH AVENUE					
MIAMI FL 33172 MIAMI FL 33172				DO NOT WEITE WATER	140.00.00
				DO NOT WRITE IN T  3. Date Incorporated or Qualified	HIS SPACE
2. Principal f	Place of Business	2a. Mailing Address		05/02/1996 4. FEI Number	Applied For
21 26				65-0662715	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				60.75	
22 27		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		8. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29 3	0]	Personal Property Tax due June 30.	XX Yes ☐ No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  SIEGE STEVEN T  81 Name					
SIEGEL, SIEVEN I					
1400 N.W. 107TH AVENUE			B2 Street	Address (P.O. Box Number is Not Acceptable)	
MIAMI FL 33172			83 / 7 6	on N.W. 107th Ave	AUL_
				_	
			84 City	,	FL 85 Zip Code 32.17.2
11. Pursuant	to the provisions of Sections 607	0502 and 607 1508. Florida Statutes	the above-named	our organism submits this statement for the nurno	FL 33172
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 registere	d agest any title if applicable (NOTE: F	Registered Agent signature	required when reinstating) DA	TE TE
12.		ANDOIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	DP	☐ DÉLETE	1.1 TITLE		Change Addition
NAME	<b>SIEGE</b> L, STEVEN		1.2 NAME		
STREET ADDRESS	1400 NW 107 AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI .		1.4 CITY-ST-ZIP		
TITLE	DECO	DELETE	2.1 TITLE	0/0/00	Change Addition
NAME	ADLER, MICHEAL		2.2 NAME		
STREET ADDRESS	1400 NW 107 AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	2. 4 CITY - ST - ZIP		
	EVAS	בן טבנבוב	3.1 TITLE		Change Addition
NAME Street address	LEVY, JOEL 1400 NW 107 AVE		3.2 NAME		
CITY-ST-ZIP	MIAMI FL		3.3 STREET ADDRESS		
TITLE	ST	DELETE	3.4. CITY+ST-ZIP 4.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	ARRIZURIETA, LUIS	בין טנננונ	4. 2 NAME		CT CHANGE CT AUUILION
STREET ADDRESS	1400 NW 107 AVE		4.2 NAME  4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP		
TITLE	AS	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	ADLER, LINDA	_	5.2 NAME		
STREET ADDRESS	1400 NW 107 AVE		5.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	_		6.4 CITY - ST - ZIP		
	ertify that the information supplie	d with this filing door not qualify for I		hip Section 119 07/2/(i) Florida Statutos Liturias	

4. 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 trusted in bowered 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.

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