## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000038788 (1)

	CASAB incipal Place 345 COLLINS SUITE CU 7	e <b>of B</b> usine	REAL ESTATE SE	Mailing Address 6345 COLLINS AVE. SUITE CU 7					
MIAMI BEACH FL 33141				MIAMI BEACH FL 33141			DO NOT WRITE IN THIS SPACE	DO NOT WRITE IN THIS SPACE	
							3. Date Incorporated or Qualified 05/06/1996		
	Principal Pi	ace of Busi	noss	2s. Mailing Address			4. FEI Number Applied For		
21	1			26			65-0675570 Not Applicat	ble	
1	Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional		
22	22			27			Fee Required		
1	City & State			City & State			Election Campaign Financing \$5.00 May Be		
23			[28]			Trust Fund Contribution			
ı	Zip	p Country Zip		<u> </u>	Country		8. This corporation owes or has paid the current year Intangible		
24	25 29 9. Name and Address of Current Regist			30		Personal Property Tax due June 30. X Yes No			
ļ			and Address of Cur	rent Hegistered Agent		Mana	10. Name and Address of New Registered Agent	—	
ĺ		SS, J D			81	Name			
6345 COLLINS AVE.					82	Street /	Address (P.O. Box Number is Not Acceptable)		
1	MiA	IMI BEACI	H FL 33141		-	<b> </b>			
1					83	}			
ŀ					84	City	85 Zip Code		
L						L	FL " 2 POWE		
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 regist 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 registed									
	agent. I ar	m <b>fam</b> iliar w	ith, and accept the ob	ligations of, Section 607.0505, Flo	rida Statute	S.	,		
SI	GNATURE		<del></del>	· · · · · · · · · · · · · · · · · · ·					
<del>                                     </del>		Signature, type	d or printed hand of registered	agent and title it applicable (NOTE AND DIRECTORS	Registered Age	ent signature	e required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12		P	OF FIGURE 7	DELETE	1.3 THILE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ion	
1		A411701170 01011100			1.2 NAME				
ı	STREET ADDRESS 6345 COLLINS AVE				1.3 STREET ADDRESS				
3	"		BEACH FL 33141		•	<b>1</b>			
111	Y-ST-ZIP			DELETE	1.4 CITY-ST-2IP 2.1 TITLE		Change Addit	ion	
NA.		'			2.2 NAME				
1	REET ADDRESS			2 3 STREET	ADDRESS				
ţ	CITY-ST-ZIP			2. 4 CITY-ST-ZIP					
TIT				DELETE	3.1 TITLE	01 · 211	Change Addit	ion	
1	NAME			3.2 NAME					
ı	STREET ADDRESS			3.3 STREET ADDRESS			i		
CITY-ST-ZIP					3.4. City-St-ZiP				
TIT				DELETE	4.1 TITLE	0, 1,,	Change Addit	ion	
NA	ME				4. 2 NAME				
1	STREET ADDRESS			4.3 STREET ADDRESS					
1	CITY-ST-ZIP				4.4 CITY - S				
_	TITLE			DELETE	5.1 TITLE		☐ Change ☐ Additi	ion	
i i	NAME			5.2 NAME					
1	REET ADDRESS				5.3 STREET	ADDRESS		;	
i	Y-ST-ZIP				5.4 CITY - S				
TIT				DELETE	6.1 TITLE		Change Addit	ion	
NA					6.2 NAME	i			
					6.3 STREET	ADDRESS			
ا					D. COTTLE				

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 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.

**FILED** 

Apr 24 1998 8:00am

Secretary of State