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 # P96000043826 (2)

FILED Apr 03 1998 8:00am Secretary of State

PRIME	BUSINESS, CORP.					
Principal Place	e of Business	Mailing Address	-		- : IODIIODI (16 IOIID OISII EDIII DEIII EGISI DEI	i dibas ilibi ištis ilsis sili (481
15915 9W 100 TERR C/O RODRIGO PAIVA 10245 SW 154TH PLACE. ST 11045 SW 154TH PLACE. ST			ITE 104		DO NOT WRITE IN T	HIS SPACE
					3. Date Incorporated or Qualified 05/22/1996	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 1024	55W. 154 Place	26			65-0666104	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State City & State City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23 // / C	ami, Horida	28 Zip	Country		Trust Fund Contribution	Added to Fees
24 331	96 25 Higmi-Dade		30		This corporation owes or has paid the Personal Property Tax due June 30.	current year intangible Ves No
	9, Name and Address of Current	Registered Agent			10. Name and Address of New Registe	
PA	IVA, RODRIGO P		81 Na	me		
15315 SW 106 TERR			82 Str	eet Addre	ess (P.O. Box Number is Not Acceptable)	
STE 411			83			
Mi	AMI FL 33198		63			
			84 Cit	y	1	FL 85 Zip Code
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with and accept the bulget	and 607.1508, Florida Statute Florida. Such change was a ens of, Section 607.0505, Flo	s, the above-nar uthorized by the rida Statules.	ned corpo corporation	oration submits this statement for the purpo on's board of directors. I hereby accept the	se of changing its registered appointment as registered
Oldrivi Olice	Signature, typed of printed name of registered agent	and title if applicable. (NOTE	Registered Agent sign	alure require	d when reinstating) DA	TE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	PVST	☐ DELETE	1.1 TITLE	P	UST Paleisof	☐ Change ☐ Addition
NAME STREET ADDRESS	PAIVA, RODRIGO P -15015 SW 106 TERR. STE-411	<u> </u>	1.2 NAME 1.3 STREET ADOR	35	1100, Rodrigo f. 0245 SW. 154Ptac 11AMI - FLORI da	e \$104
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	" <i>‰</i>	MAMI - FLORIDA	33196
TITLE	tota meet 2 P	DELETE	2.1 TITLE		, , , , , , , , , , , , , , , , , , , ,	☐ Change ☐ Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDR	ess		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP			
TITLE		DELETE	3.1 TITLE			Change Addition
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRE	:ee		
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRI	SS		
CITY-ST-ZIP		T peress	4.4 CITY - ST - ZIP			1 At
TITLE		DELETE	5.1 TITLE			Change Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDR	:00		
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			\
STREET ADDRESS			6 3 STREET ADDR	ss		
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

14. 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 suppliemental 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 attachmon with an address.

SIGNATURE:

and the

Rodngo P. Pajul

1/3/198

(305) 388.4615