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PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Apr 30 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000047325 (1)

## **ECONOMIC RESEARCH & MARKETING CORPORATION**

Principal Place of Business Mailing Address 14829 SW 104 ST 14629 SW 104 ST SUITE #134 MIAMI FL 33186 SUITE #134 DO NOT WRITE IN THIS SPACE MIAMI FL 33186 3. Date Incorporated or Qualified 05/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0672787 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional X 5. Cortificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Ζιρ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30 Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name RADOVICH, JAMES 14629 SW 104 ST Street Address (P.O. Box Number is Not Acceptable) **SUITE #134** 83 **MIAMI FL 33186** 84 City Zip Code 11. Pursuant to the provisions of Sections 607.05.02 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 Londa. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typicd or printed name of regularicating of and title diapph, unle (NOTE Registered Agent signature required when revistating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 III) F Change Addition RADOVICH, JAMES NAME 1.2 NAME 10581 SW 155 PL APT 1612 STREET ADDRESS 1.3 STREE1 ADDRESS MIAMI FL 33196-3508 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE Change Addition 21 111LE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST- ZIP DELETE TITLE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - ZIP DELETE TITLE Change Addition 51 TITLE NAME 5 2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE ☐ Change Addition 6 1 TITLE NAME 6.2 NAME

James Radoxich And 22nd

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

63 STREET ADDRESS