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

## **PROFIT CORPORATION ANNUAL REPORT**

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

ANN	UAL REPORT 1998	Secretary DIVISION OF CO	of State	ate		Secreta	ary (	of S	tate
POCUMENT # P96000049808 (4) OVERSEAS COASTAL INVESTMENT, INC.							) 	18181 18111 <b>81</b> 1	181 1811 FERT
Principal Plac	ce of Business	Mailing Address						(818) 1811 881	
17300 S.W. 85TH AVENUE 17300 S.W. 85TH AVENUE MIAMI FL 33157 MIAMI FL 33157						DO NOT WRITE	E IN THIS SI	PACE	
					Ţ	3. Date Incorporated or Qualified			
	· · · · · · · · · · · · · · · · · · ·			06/11/1996					
	2. Principal Place of Business 2a. Mailing Address					4. FEI Number			plied For
21	26 Suite, Apt. #, etc. Suite, Apt. #, etc.					65-0741887			ot Applicable
22		Suite, Apt. #, etc.	27			5. Certificate of Status Desired		\$8.75 A	
City & Sta	te	City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	7 - 1
Zip	Country	Zip	Count	ry	]	8. This corporation owes or has pa	_	<i>-</i> " —	
24	25		30			Personal Property Tax due June			J No
9. Name and Address of Current Registered Agent						10. Name and Address of New Re	gistered A	gent	
DE KOSKO, ANDRE					•				
17300 S.W. 85TH AVE.				2 Street	Addres	s (P.O. Box Number is Not Acceptal	ole)		
MIAMI FL 33157									
			8	3					İ
			В	4 City				85 Zip (	Code
44.0	4-46	0 1 007 4500 First-1- 0 4		1		All distances for all	FL		
office or i	to the provisions of Sections 607,050 registered agent, or both, in the State am familiar with, and accept the obligations.	of Florida, Such change was au etiens of Section 607, 1508, Florida	s, the abo thorized b	oy the cor	rporation	is board of directors. I hereby acce	pt the appoi	intment as	registered
	am ramiliar with, and accept the obliga	ations of, Section 607.0505, Flori	ida Siaiuti	es.					1
SIGNATURE	Signature, typed or printed name of registered age	ent and title it applicable. (NOTE:	Registered A	gent signatur	re required o	when reinstating)	DATE		<del></del>
12.		D DIRECTORS	13.	<u></u>		ADDITIONS/CHANGES TO OFFICE	DERS AND	DIRECTOR	S IN 12
TITLE	PD	☐ DELETE	1.1 TITLE					Change	Addition
NAME	DE KOSKO, ANDRE	DE KOSKO, ANDRE		1.2 NAME					
STREET ADDRESS	17300 SW 85TH AVE.		1.3 STRE	1.3 STREET ADDRESS					ļ
CITY-ST-ZIP	I MISS OF COLUMN			-ST-ZIP					
TITLE	S DELETE			2.1 TITLE				Change	Addition
NAME	NIETO, MICAELA D		2.2 NAM	Ē	1				
STREET ADDRESS			2.3 STRE	et aodress					
CITY-ST-ZIP	MIAMI FL 33157		2. 4 CITY	-ST-ZIP					
TITLE	Ť	DELETE	3.1 TITLE		-			Change	☐ Addition
NAME	DE KOSKO, MARIETTA		3.2 NAM6	=					İ
STREET ADDRESS	17300 SW 85 AVE		3.3 STRE	3.3 STREET ADDRESS					ŀ
CITY-ST-ZIP			3.4. City	- S1 - ZIP	<u> </u>				
TITLE		☐ DELETE 4.1 T						Change	☐ Addition
NAME			4. 2 NAM	E					ĺ
STREET ADDRESS			4.3 STREE	ET ADDRESS					
CITY-ST-ZIP				4.4 CITY - ST - ZIP					
TITLE		DELETÉ	5.1 TITLE					Change	Addition
NAME			5.2 NAME						Ì
STREET ADDRESS			5.3 STREE	et address					
CITY-ST-ZIP	<u> </u>		5.4 CITY-	ST-ZIP					
TITLE		DELETE	6.1 TITLE				- T	Change	☐ Addition

CITY-ST-ZIP 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 changes in on an appearance of the corporation of the receiver of 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 changes in or the receiver of the corporation of the receiver of the r

6.3 STREET ADDRESS

STREET ADDRESS

7/17/90

**FILED** 

Mar 03 1998 8:00am