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

Mailing Address

C/O JEFF SCHWARTZ 4600 OLYMPIC WAY

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9600058957

Principal Place of Business **605 FAIRWAY DRIVE**

MIAMI BEACH FL 33141

BENJAMIN S. SCHWARTZ, CHARTERED

| J\$ | EVERGREEN CO 80439 | | | | | DO NOT WRITE IN THIS SPACE | | | |
|------------------------|--|---|--------------------|-------------|-----------------------|--|---|--|---------------------|
| | US | | | | | 3. Date Incorporated or Qualifed | | | |
| | | | • | | | 07/11/1996 | | | 470 |
| 2. Principal Pi | ce of Business 2a. Mailing Address | | | | | 4. FEI Number | | Арр | lied For |
| أ | | 26 | | | | 65-0680223 | | Not | Applicable |
| Suite, Apt. | #. etc. | Suite, Ap | t. #, etc. | | | P. C. Walter of Chatter Desired | | \$8.75 A | dditional |
| ٠, ١, ١, ١, ١ | 27 | | | | | 5. Certifcate of Status Desired | | Fee Red | uired |
| City & State | City & State City & State | | | | | 6. Election Campaign Financin | <u> </u> | \$5.00 | /lav Be |
| ¬ ' | 28 | | | | | Trust Fund Contribution | a 🗆 | Added to | • |
| Zip | Country | Zip | | | v | 8. This corporation owes the co | ırrent vear İr | ntangible | |
| - P | 25 29 3 | | | <u> </u> | | Personal Property Tax. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | □No |
| 4 (| 9. Name and Address of Current | | | | | 10. Name and Address of Nev | Registered | l Agent | |
| | 7. Name and Address of Current | | | 8 | Name | | <u> </u> | - | "- |
| SCH | WARTZ RENJAMIN S | | | | ŀ | | | | |
| DEN ens | FAIRWAY DRIVE | HED | | 8: | 2 Street Add | ress (P.O. Box Number is Not Acce | ptable) | | |
| | MI BEACH FL 33141 | • • | | - | | \$ 4.50 jed 4, whish 5 ft at 55000 | 29-1-252-00-0 23-0-751-24-3 | e dague la segue de la companya de l | 1120 12 37 45 4 |
| MIAN | WI DEACH FE 33141 | | | 8: | 3 | | | | |
| | | | | 8 | 4 City | 1995 - 1995 AND 1997 AND 177 AND 1 | 7 950 464 | 85 Zip C | ode |
| | D. P. D. Mar | 75.200 s. ma mm | | - 1 | | | FI | _ ' | |
| 11. Pursuant | to the provisions of Sections 607.0502 | 2 and 607.1508; F | lorida Statutes, | the abo | ve-named com | poration submits this statement for the | ne purpose o | f changing its | egistered |
| office of r | to the provisions of Sections 607.0502 egistered agent, or both, in the State of am familiar with, and accept the obligat | of Florida. Such c | hange was autho | orized b | y the corporati | ion's board of directors. I hereby acc | cept the appo | ointment as reg | istered |
| ∞ agent.≀a | ım tamıllar with, and accept the obligat | ionsidi, section o | 107.0505, 1 10110a | Claidic | | | | | ", |
| SIGNATURE | Signature, typed or printed name of registered agent | and title if annicable | (NOTE: Rec | istered Ap | ent signature require | ed when reinstating) / (\sigma_i) \sigma | DATE | | |
| 12. | OFFICERS AND DIRECTORS | | | 13. | | ADDITIONS/CHANGES TO | OFFICERS A | ND DIRECTO | RS IN 12 |
| TITLE | DP · | | DELETE | 1.1 TITLE | | 55-0980220 | | ☐ Change | Addition |
| | SCHWARTZ, BENJAMIN S | _ | | 1.2 NAME | | as a Carlo Maria Carlo | | | |
| NAME | | | | | | | | | |
| STREET ADDRESS | 605 FAIRWAY DRIVE | į | | | ET ADDRESS | | | | |
| CITY-ST-ZIP | MIAMI BEACH FL 33141 | | 1 ac exc | 1.4 CITY- | | | | Change | Addition |
| TITLE | | L | DELETE | 2.1 TITLE | 1 | | | ☐ Criange | |
| NAME | | | | 2.2 NAME | | • | | | |
| STREET ADDRESS | | | · | 2.3 STRE | ET ADDRESS | | | | |
| CITY-ST-ZIP | The state of the s | مها الادر و هم و در طاله الادراء الدوراء الدوراء الدوراء الدوراء الدوراء الدوراء الدوراء الدوراء الدوراء الدور الدوراء الدوراء | 4 - | 2. 4 CITY | -ST-ZIP | | - | · | |
| TITLE | The second secon | ₹ <i>₹</i> ₩, 1, | DELETE | 3.1 TITLE | | | | ☐ Change | ☐ Addition |
| : # JH | Mary and the Constitution of the Constitution | tict:- | | 3.2 NAME | . | | | | |
| NAME () | MANAGERI CHARL | r : Cose | | | ET ADDRESS | gag night in haa 1000 in 6 mee | *** 135 @\$ 11 MP. P | t de gregoriale de Martin | aring target are an |
| JIREE I ALUKESS | E BEACH FL 001% | • | | 3.4. CITY | 1 | · 经基础 心臟 (對) 表版 | | | |
| OITI-OI-ZII | · · · · · · | | DELETE | 4.1 TITLE | | 2 184 C 10 10 10 10 10 10 10 10 10 10 10 10 10 | | Change | Addition |
| TITLE | 1 | | | | | | • | | |
| NAME ORD TAKSVAY I | MIVE | 600.25 | * - 73 % . | 4. 2 NAM | | | | | i i |
| STREET ADDRESS | | 网络拉拉斯特 | | | ET ADDRESS | | | | |
| CITY-ST-ZIP | | हपुरास स्वर्धात | | 4.4 CITY- | | | · . | | L Addition |
| TITLE | | ON [| DELETE | 5.1 TITLE | I . | yer to . | | Change | ☐ Addition |
| NAME | | | | 5.2 NAME | <u> </u> | $C_{i,j}^{*}(A)$ $C_{i,j}(A)$ | | | |
| STREET ADDRESS | | | | 5.3 STRE | ET ADDRESS | | | | |
| CITY-ST-ZIP | [H ²] | • | | 5.4 CITY | ST-ZIP | 55 (3:02/3) | | | |
| TITLE | SOMETHIES, SESSOCIET L | , [| DELETE | 6.1 TITLE | | | | ☐ Change | Addition |
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| | 1 805 PARTON 1 PRACE | | | 6.2 NAMI | | | | | |
| NAME | AMBRICINEACT; Et SEL. L. | | | 6.2 NAMI | | | | | |
| NAME STREET ADDRESS | AMBRICINEACT; Et SEL. L. | | | | ET ADDRESS | : | | | |

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 supplied annual reports 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 of trustee employeed 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 or an attachment with an addition, with all additions, with all other like empowered.

FILED

Jan 28, 1999 8:00am

Secretary of State

01-28-1999 90031 044 ***150.00

DO NOT WRITE IN THIS SPACE