SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

1. Corporation Name P96000060829 (4)

## **FILED** Oct 01 1998 8:00am Secretary of State

ONLLIA	INC.							
Principal Plac	ce of Business	Mailing Address				{	<u>sa džim gonor lome krono rom kade</u>	
330 BISCAYNE BLVD. STE 1100 330 BISCAYNE BLVD. STE 1								
MIAMI FL 33132 MIAMI FL 33132							_	
1						DO NOT WRITE IN TH	IS SPACE	
İ						3. Date Incorporated or Qualified		
2 Principal P	Place of Business	2a. Mailing Address			<u></u>	07/18/1996 4. FEI Number		
21	tada ej sudilitosa	26				65-0705159	Applied For Not Applicable	
Suite, Apt.	. #, etc,	Suite, Apt. #, etc.				00 0100 108	\$8.75 Additional	
22	27				5. Certificate of Status Desired	Fee Required		
City & Stat	le	City & State	·			6. Election Campaign Financing	\$5.00 May Be	
23		28				Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Col	untry		8. This corporation owes or has paid the co	urrent year Intengible	
24	25	29	30	<del></del>		Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Curren	t Registered Agent		041	NI.	10. Name and Address of New Registere	d Agent	
	APSON, WESLEY			81	Name			
330 BISCAYNE BLVD.				82	Street Addre	Address (P.O. Box Number is Not Acceptable)		
,	. 1100					_ <del>_</del>		
MIA	MI FL <b>3</b> 3132			83				
				84	City		85 Zip Code	
44 . D	140 the environment of the COT 0501	) 1 007 4 F00 F1 11 61 4		<u> </u>		FI		
j oπiçe or	registered agent, or both, in the State	of Florida. Such change was	s authorize	d by th	amed corpora le corporatio	ation submits this statement for the purpose of one is board of directors. I hereby accept the appoint	ch <b>ang</b> ing its registered	
agent. I a	am fa <b>mil</b> lar with, and accept the obliga	ations of, section 607.0505, I	Florida Stat	tutes.			on grown as regressioned	
SIGNATURE	Signalum, typed or printed name of registered agen	I and title if earlicable	MOTE: Deplete	arad Anar	at alanatura sea de	red when reinstaling) DATE		
12.		кано вне паружение.	(nio i c. nagase	atan Mai	it egnatore requi	red when reinstaling) DATE		
	OFFICERS AN	D DIRECTORS				ADDITIONS/CHANGES TO DESICERS A	ND DIRECTORS IN 12	
TITLE	D OFFICERS AIV	D DIRECTORS	<b>13.</b>			ADDITIONS/CHANGES TO OFFICERS A	<del>                                      </del>	
		D DIRECTORS DELETE	13.	TLE		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12  Change Addition	
TITLE	D	DELETE	13. 1.1 T/ 1.2 N/	TLE	ORESS	ADDITIONS/CHANGES TO OFFICERS A	<del>                                      </del>	
TITLE NAME	D ALEXANDER, AMRICK	DELETE	13. 1.1 TI 1.2 N/ 1.3 ST	TLE		ADDITIONS/CHANGES TO OFFICERS A	<del>                                      </del>	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALEXANDER, AMRICK 330 BISCAYNE BLVD., STE. 11 MIAMI FL D SAMPSON, WESLEY	DELETE	13. 1.1 TI 1.2 N/ 1.3 ST 1.4 CI	TLE AME REET AD TY-ST-ZII TLE		ADDITIONS/CHANGES TO OFFICERS A	<del>                                      </del>	
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TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	D ALEXANDER, AMRICK 330 BISCAYNE BLVD., STE. 11 MIAMI FL D SAMPSON, WESLEY 330 BISCAYNE BLVD., STE. 11	DELETE  DELETE  DELETE	13. 1.1 TI 1.2 NA 1.3 ST 1.4 CI 2.1 TI 2.2 NA 2.3 ST 2.4 CI 3.1 TI 3.2 NA 3.3 ST 4.1 TII 4.2 NA 4.3 STI 4.4 CI	TLE  AME  REET AD  TY-ST-ZIF  TLE  AME  REET AD  TY-ST-ZIF  TLE  AME  REET ADI  TY-ST-ZIF  TLE  AME  REET ADI  TY-ST-ZIF  TLE  AME  REET ADI  TY-ST-ZIF  TLE  TLE  TLE  TLE  TLE  TLE  TLE  TL	P DRESS P DRESS P	ADDITIONS/CHANGES TO OFFICERS A	Change Addition  Change Addition  Change Addition	
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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 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.

7-31-98