## 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 # P96000082439 (6)

## FILED Mar 16 1998 8:00am Secretary of State

1. (	PDQ P	THERMO	ES CORP	000002							
Prin	cipal Place	of Busines	SS	Mailing	Address					18 JIBIL QIQBB II	16 <b>8</b> 1811 1891
20801 BISCAYNE BLVD. STE 455 20801 BISCAYNE BLVD. STE 455 AVENTURA FL 33180 AVENTURA FL 33180									DO NOT WRITE IN THIS	SPACE	
									3. Date incorporated or Qualified		
									10/07/1996		
2. F	Principal Place of Business 2a. Mail				Mailing Address				4. FEI Number	A	pplied For
21	¬ '				26				65-0713478	<b>→</b>	t Applicable
	Sulte, Apt. #, etc.			Suite	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional equired
	City & State				City & State				6. Election Campaign Financing	\$5.00	May Be
23				28	28				Trust Fund Contribution		to Fees
	Zip		Country	Zip	•	Cour	ntry		8. This corporation owes or has pald the cur	rent year Int	angible
24		25 29 30			30			Personal Property Tax due June 30.  Yes X No			
		9. Name	and Address of	Current Registered	Agent				10. Name and Address of New Registered	Agent	
	CO	RPCO, INC	C.				81	Name			
2699 SOUTH BAYSHORE BLVD. 7TH FLOOR						-	82 Street Add		ess (P.O. Box Number is Not Acceptable)		
MIAMI FL 33133											
							83				
							84	City		<b>85</b> Zip	Code
									<u>FL</u>		
11.	Pursuant t office or re agent. I ar	o the provis egistered ag m familiar w	sions of Sections 6 gent, or both, in the ith, and accept the	07.0502 and 607.150 e State of Florida. Su- e obligations of, Sect	08, Ftorida Statu ch change was ion 607.05 <b>05,</b> F	tes, the ab authorized lorida Statu	ove by ltes	e-named corp the corporati	oration submits this statement for the purpose of on's board of directors. I hereby accept the app	changing if ointment as	is registered registered
SIG	nature .	Clonet up typed	sings to amen betrito volt	tered agent and tille if applic-	able (NO	TF: Begistered	Age	at signature require	ed when reinstating) DATE		<i>,</i>
12.		Signature, typeo		RS AND DIRECTORS		13.	, igc	in digitatory require	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12
TITLE		P			DELETE	1.1 TIT	LE			Change	Addition
NAME		CLEEMAN, PAUL				1.2 NAME					
STREET ADDRESS			BISCAYNE BLVD	D., SUITE 455	55 1.3 5		1.3 STREET ADDRESS				
	ST-ZIP	AVENTURA FL				1.4 CITY - ST - ZIP		T- ZIP			13
TITLE	VPST				DELETE					Change	Addition C
NAMI				١.		2.2 NA	ME				1
			BISCAYNE BLVD		E 455		2.3 STREET ADDRESS				
CITY-ST-ZIP		AVENT					2. 4 CITY-ST-ZIP				
TITLE					DELETE	3.1 TIT	LE			Change	AddItion
NAME	AME			3.2 NA		ME					
STREET ADDRESS					3.3 STF	REET	ADDRESS				
CITY-ST-ZIP						3.4. CII	TY-S	ST-ZIP		F-1 .:	
TITLE					4.1 111	4.1 TITLE			☐ Change	Addition	
NAME						4.2 NA	ME				
STREET ADDRESS			4.3 \$7			REET.	ADDRESS				
CITY-ST-ZIP						4.4 CITY-		T- ZIP			- Addition
TITLE						5.1 TITLE			Change	☐ Addition	
NAME						5.2 NAI					1
STRE	ET ADDRESS							ADDRESS			-
CITY-ST-ZIP		i or cer			5.4 CIT		T-ZIP		Change	☐ Addition	
TITLE		1			DELETE	6.1 TITLE				L) viralige	- Addition
NAME						6.2 NA					1
STRE	ET ADDRESS							ADDRESS			
CITY-ST-ZIP  14. I hereby certify that the information supplied with this filing does not qualify for the							Y-\$1	T-ZIP			1

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 informatic indicated on this annual report or supplies that I must 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 resolver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Plant 13 if the process of the corporation of the resolver of the corporation of the corporation of the resolver of the corporation of the c

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