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

DOCI IMEN

P96000083924 (6)

FILED May 13 1998 8:00am Secretary of State

1. Corporatio	OTHERS,		J000638	924 (O)									
Principal Plac	e of Busines	Mailing	Mailing Address							****			
1111 8. FEDERAL HWY.				1111 S. FEDERAL HWY.									
SUITE 330 STUART FL 34994				SUITE 330 STUART FL 34994					DO NOT WRITE IN THIS SPACE				
	77007		Oromi	1 12 04001				}	3. Date Incorporated or Qualified				٦
								l	10/08/1996				
2. Principal P	lace of Busi	ness	2a, Mail	2a. Mailing Address					4. FEI Number		TA	Applied For	1
21			26	26					65-0740588			lot Applicable	1
Suite, Apl.	#, e tc.	Suit	Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional	1	
22		27						U Commode of Grand Boomed			Required	4	
City & Stat	le	- · ·	City & State				}	6. Election Campaign Financing			May Be		
23 Zip			Zip Country					Trust Fund Contribution					
24		Country 25	F, ·	h, ' h			Country		 This corporation owes or has paid Personal Property Tax due June 30 	-		ntangible No	
9. Name and Address of Current								1.	10. Name and Address of New Regis				1
CC	OVEY, JAMI					81	Name						1
		RAL HWY.					Otrock A.		(O.O. Barris Markeria Marketana				4
SUITE 330							82 Street Add		s (P.O. Box Number is Not Acceptable	J			
ST	UART FL 3	4994				83							1
						84	City				35 Zip	Code	┨
						1	,						i
11. Pursuant	to the provis	sions of Sections 60	17.0502 and 607.15	08, Florida Statut	es, the a	bove	e-named c	orpora	ation submits this statement for the pur 's board of directors. I hereby accept	pose of ch	anging	its registered	1
agent. I a	ım f a miliar w	ith, and accept the	obligations of, Sec	tion 607.0505, FI	orida Sta	tutes	ille corpo	Si citiOi i	rs coard of directors. Thereby accept a	пе арроп	oneni o	s redistaran	
SIGNATURE	-			<u></u> _								<u></u>	
12.	Signature, types		ned agent and title if appli RS AND DIRECTOR	- 	F Registers	d Age	nt signature re	equired v	when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE DO AND D	DECTO	DC IN 10	Ę
TITLE	T D	Oricer	13 AND DIRECTOR	DELETE 1.1 TO					ADDITIONS/CHANGES TO OFFICE		Change		13
NAME	RODRIG	BUEZ, BLAIS M			1.2 N				_				
STREET ADDRESS	1111 S.	, SUITE 330	30			1.3 STREET ADDRESS						18	
CITY-ST-ZIP	STUAR	•				1.4 CITY - ST - ZIP						Ş	
TITLE	0			DELETE	2.1 T						Change	Addition	וְל
NAME		BUEZ, MARIO					2.2 NAMF						
STREET ADORESS		SUITE 330	330			2.3 STHEEL ADDRESS						ı	
CITY-ST-ZIP	STUARI					2.4 CITY-ST-ZIP]	
TITLE	D	WIPS BARRET		☐ DELETE	3.1 T	11LE					Change	Addition	
NAME RODRIGUEZ, ROBERT			DI IITE DOG	3.2 N			-						
STREET ADDRESS 1111 S FEDERAL HWY SUITE STUART FL			5011E 330				ADDRESS						
CITY-ST-ZIP	D	I FL		DOUBTE	_	HTY-S	T-ZIP				Chesas	A datates	1
TITLE		GUEZ, MICHAEL		DELETE	4.1 To					L.	Change	Addition	
NAME OTDEET ADODESS		SUITE 330		4. 2 NAN									
STREET ADORESS City-St-Zip	STUARI		4.3 STREET ADD 4.4 CITY- ST- Z			1						}	
TITLE				DELETE	5.1 T		1-215				Change	Addition	ĺ
NAME					5.2 NAM		ĺ						
STREET ADDRESS					5.3 STREET		ADDRESS		·				
CITY-ST-ZIP				5.4 CITY-ST-ZIP									
TITLE				☐ DELETE	6.1 TI					L	Change	Addition	1
NAME					6.2 N	AME							
STREET ADDRESS	}				6.3 S	TREET	ADDRESS						
CITY-ST-ZIP	L				6.4 C	ITY-SI	I-ZIP						

14. 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 port 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 phstee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, or on an attachment with an address.

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RIAL M ROBBIGUE

10/27/28

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