## 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 # P96000090338 (0)

ATLANTIC SOUTH DEVELOPERS, INC.

Principal Place of Business			Mailing	Mailing Address					a marta Mariai Affilia Affilia mația i	1881: <b>48198 (</b> 111 <b>8)</b> 11	IBI 1911 IB <b>C</b> !	
12651 S DIXIE HWY Suite 209 Miami Fl 33156			SUITE	1.2651 S DIXIE HWY Suite 209 Miami Fl 33156					DO NOT WRITE IN THI	\$ SPACE		
								3. Date Incorporate	ed or Qualified			
	<del> </del>							11/04/1996		<del></del>		
2. Principal Pl	lace of Busin	1088	1	2a. Mailing Address				4. FEI Number		Applied For		
21	4 -1-		26	Suite, Apt #, etc.				65-073356	9		ot Applicable	
Suite, Apt. #, etc.			-	<b>⊢</b>				5. Certificate of Sta	itus Desired 🔲		Additional equired	
City & State			27 City	City & State				S Flasting Compa			<del>-`</del>	
23			28	<b>├</b> ¬ '				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
	Zip Country			Zip Cou								
24		25 29 30			-	Personal Property Tax due June 30. Yes No			_ ~			
8-4	9. Name	and Address of Cur					10. Name and Address of New Registered Agent					
RIF	GLER, JAN	MES.				81	Name					
12651 \$ DIXIE HWY							Ctroot Addro	ess (P.O. Box Number is Not Acceptable)				
SUITE 209							Street Addre	35 (1 .O. DOX NUMBER	is Not Acceptable)		ŀ	
	MI FL 331	56										
						84	City			. 85 Zip	Code	
						04	City		F	L [83] 21P	Code	
office or re agent I a	e <b>ciste</b> red ac	ions of Sections 607.0 jent, or both, in the Sta th, and accept the ob-	ate of Florida. Su	ich change was a	authorized	l by	the corporation	oration submits this sta on's board of directors	tement for the purpose . I hereby accept the a	of changing in order	ts registered registered	
SIGNATURE	Stonature typed	For pointed mane of registered	are of and little if appoin	able (NO)	t Registered	Age	rit signature require	d when reinstating)	DATE			
12.			ND DIRECTOR		13.				NGES TO OFFICERS A	ND DIRECTO	RS IN 12	
TITLE	DP			DELFTE	1.1 TH	LE	P	1 100	Andres	Change	Addition	
NAME	RODRIG	UEZ, ANDRES			1,2 NA	ME		odriguez				
STREET ADDRESS 42051 S DIXIE HWY GUITE 200			<del>-209-</del>	1.3 \$1			ADDRESS 13	8145W1	89 CT			
CITY-ST-ZIP	MIAMI-F	<del>L 99150</del>		1.4 C			T- 7IP	IAMI FO	33/86	•		
TITLE	DS			DELETE	2.1 TIT	LE	P	odriguez 38145W	ANdres	Change	Addition	
HAME RODRIGUEZ, ANDRES				2.2 N				14 EU	139 ct			
STREET ADDRESS 12651-6 DIXIE HWY SUITE 201			209		2.3 ST	REET	ADDRESS /	3811.2.0				
CITY-ST-ZIP	- MIAMI-F	<del>L 3315</del> 6			2 4 0	TY-S	ST-ZIP /	n/~~/ .	FL 3318			
TITLE				DELETE	3.1 117	ιF				Change	Addition	
NAME					3.2 NA	ME						
STREET ADDRESS					3.3 S1	REET	ADDRESS					
CITY-ST-ZIP					3.4. CI	IY-S	ST-ZIP					
TITLE				DELETE	4.1 111	LF				Change	Addition	
NAME					4.2 N	<b>ME</b>						
STREET ADDRESS					4.3 ST	REET	ADDRESS				!	
CITY-ST-ZIP					4.4 CI	Y-\$	1 - ZIP					
TITLE				DELETE	5.1 TIT	LE				Change	Addition	
NAME					52 NA	ME						
STREET ANDRESS					4 3 ST	REET	ADDRESS					

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.1 TITLE 6.2 NAME

DELETE

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 supplied enter a new 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 exemption and that my name appears in Block 12 or Block 13 if changed, door an attachment with a laddress.

Change

Addition

**FILED** 

May 04 1998 8:00am

Secretary of State

CITY-ST-ZIP

NAMĘ STREET ADDRESS