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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 10, 1999 8:00 am Secretary of State

05-10-1999 90016 029 ***158.75

Principal Place of Business Mailing Address 701 NE 23RD STREET 305 306	
305 305 SIAMI FL 33137 MIAMI FL 33137 SIAMI FL 3313	
MIAMI FL 33137 MIAMI FL 33137 Date Incorporated	
3. Date Incorporated	O NOT WRITE IN THIS SPACE
01/01/1997	I or Qualifed
2 Mailing Address 4 FEI Number	Applied For
2. Principal Place of Business 22. Walling Address 25 Steet 65-0706604	Not Applicable
Suite, Apt. #, etc. Suite, Apt. # etc. 5. Certificate of Statu	s Desired \$8.75 Additional
22 4 308	ree Required
City & State City & State 6. Election Campaig	
23 MIAMI, Florish 28 Miami, Fl. Trust Fund Contribution of Country 2 p Country 8. This corporation of Country 2 p Country 8.	
	owes the current year Intangible
	ess of New Registered Agent
GOLDSMITH, JOHN JR 701 NE 23RD STREET 81 Name JOHN W. Gold 82 Street Address (P.O. Box Number is 70 / N. E. 237 St	DSMITH JR
(305) 308	
MIAMI FL 33137	85 Zip Code
84 City M14mi	FL 3 3 3 7
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this state office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I agent. I am familiar with, and accept the original statutes. SIGNATURE	ment for the purpose of changing its registered hereby accept the appointment as registered 4/37/99
A DOUTION OF CHAR	' DATE'
17 UFFICERS AND DIRECTORS ■ 13. ADDITIONS/OTAL	IGES TO OFFICERS AND DIRECTORS IN 12
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CITY-ST-ZIP 14. 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, with all other like empowered.

63 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS