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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000094986 (2)

FILED Jan 15 1998 8:00am Secretary of State

1. Corporation DOUGL	AS SCHWARTZ, INC.	, o o o o o o o o o o o o o o o o o o o				
Principal Place	e of Business	Mailing Address			1 00115 00110 1D114 01010 10101 F0118 0111 1001	
8717 S.W. 79TH PLACE MIAMI FL 33143-7040		8717 S.W. 79TH PLACE MIAMI FL 33143-7040		DO NOT WR	ITE IN THIS SPACE	
				3. Date Incorporated or Qualifie 01/01/1997		
_	ace of Business	2a, Mailing Address		4. FEI Number 65-0714455	Applied For Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6, Election Campaign Financing		
23		28	.,	Trust Fund Contribution	Added to Fees	
Ζιρ	Country	Zip	Country 30	This corporation owes or has Personal Property Tax due Ju	. – . – .	
24	25 9. Name and Address of Curre	29 29 Agent	[30]	10. Name and Address of New		
INCORPORATORS PLUS, INC. 1214 N. UNIVERSITY DRIVE PLANTATION FL 33322			82 Street Addr	Douglas Schwartz ddress (P.O. Box Number is Not Acceptable) 8717 S.W. 79th Place		
11. Pursuant office or ragent. I a	Navida Ja	hugi	es, the above-named corporate of the cor	nuglas Schwartz	e purpose of changing its registered cept the appointment as registered	
12.	Signature, typed or printed pute of registered a OFFICERS A	ND DIRECTORS	L Registereo Agent signature requir		FICERS AND DIRECTORS IN 12	
THILE	D	DELETE	1.1 Tifle		Change Addition	
NAME	SCHWARTZ, DOUGLAS		1.2 NAME			
STREET ADDRESS	8717 S.W. 79TH PLACE		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33143-7040		1.4 CHY-ST-2(P			
TITLE		DELLTE	2.1 TITLE		[] Change [] Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS 2. 4 CHTY - ST - ZIP			
CHY-ST-ZIP TITLE		DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME		-	
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - \$1 - 7IP			
TITLE		DELETE	4.1 7(fLE		Change Addition	
NAME		DELETE			=	
		L DETERE	4. 2 NAME		-	
STREET ADDRESS		L.J DECER	4.2 NAME 4.3 STREET ADDRESS		•	
STREET ADDRESS CITY-ST-ZIP		DELLIC				
		DELETE	4.3 STREET ADDRESS		Change Addition	
CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CHY+ST+ZIP		Change Addition	
CITY-SI-ZIP TITLE			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition	
CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP		☐ DELETE	4.3 STREET ADDRESS 4.4 CHY-ST-ZIP 5.1 TITLE 5.2 NAM! 5.3 STREET ADDRESS 5.4 CHY-ST-ZIP			
CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE			4.3 STREET ADDRESS 4.4 CHY-SI-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CHY-SI-ZIP 6.1 TITLE		☐ Change ☐ Addition ☐ Change ☐ Addition	
CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME		☐ DELETE	4.3 STREET ADDRESS 4.4 CHY-ST-ZIP 5.1 TITLE 5.2 NAMI 5.3 STREET ADDRESS 5.4 CHY-ST-ZIP 6.1 TITLE 6.2 NAME			
CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE		☐ DELETE	4.3 STREET ADDRESS 4.4 CHY-SI-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CHY-SI-ZIP 6.1 TITLE			

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 trissic 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 affactment with all address.

Douglas Schwartz, Pres.

1205) 590-2276