## 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

## FILED Mar 13 1998 8:00am Secretary of State

| DOCU   | MENT # P960   | 000102062 (2   | 2)                               |                       |   |                                       |
|--|---|--|----------------------------------|-----------------------|---|---------------------------------------|
| _  |   | •  | -/                               |                       |   |                                       |
| u·E·D·                                       | BUSINESS & ASSOCIA  | ILES CORP.   |                                  |                       | * 18611881 IIA (\$118 BUIL BRID BAIN BAIN BAIN  | . #8:110 (18): Bailb Cittl (18): 18): |
|  |   |  |                                  |                       |   |                                       |
| Principal Place of Business Mailing Address  |   |  |                                  |                       | {   | . BOULD FADAL BOURE DAVID HAR UERL    |
| 331 IVES D                                   | AIRY ROAD STE 8   | 331 IVES DAIRY ROAL  | D STE 8                          |                       |   |                                       |
| NO MIAMI BEACH FL 33179 NO MIAMI BEACH FL 33 |   |  |                                  |                       | DO NOT WRITE IN TH  | IIC COLOE                             |
|  |   |  |                                  |                       | 3. Date Incorporated or Qualified   | 15 SPACE                              |
|  |   |  |                                  |                       | 12/18/1996  |                                       |
| 2. Principal F                               | Place of Business   | 2a. Mailing Address  |                                  |                       | 4. FEI Number   | Applied For                           |
| 21   |   | 26   |                                  |                       | 65-0714663  | Not Applicable                        |
| Suite, Apt.                                  | #, etc.   | Suite, Apt. #, etc.  |                                  |                       | 5. Certificate of Status Desired  | \$8.75 Additional                     |
| City & Stat                                  | le  | City & State   |                                  |                       |   | Fee Required                          |
| 23   | .•  | 28   |                                  |                       | Election Campaign Financing     Trust Fund Contribution   | \$5.00 May Be<br>Added to Fees        |
| Zip  | Country   | Zip  | Count                            | try                   | 8. This corporation owes or has pald the  |                                       |
| 24   | 25  | 29   | 30                               |                       | Personal Property Tax due June 30.  | Yes No                                |
|  | 9. Name and Address of Cu   | urrent Registered Agent  |                                  | 21                    | 10. Name and Address of New Register  | ad Agent                              |
|  | ARTINEZ, EDWARD J   |  | 6                                | 1 Name                |   |                                       |
| 331 IVES DAIRY ROAD STE 8                    |   |  | 8                                | 2 Street Add          | ress (P.O. Box Number is Not Acceptable)  | <del></del>                           |
| N  | O MIAMI BEACH FL 33179  |  | 8                                | 3                     |   |                                       |
|  |   |  | L                                |                       |   |                                       |
|  |   |  | 8                                | 4 City                | F   | 85 Zip Code                           |
| 11. Pursuant                                 | to the provisions of Sections 607                                     | .0502 and 607.1508, Florida Stat   | utos, the abo                    | ve-named corp         | poration submits this statement for the purpose   | of changing its registered            |
| agent. I a                                   | registered agent, or both, in the sim familiar with, and accept the d | state of Florida. Such change was<br>obligations of, Section 607.0505, I | s authorized i<br>Florida Statut | by the corpora<br>es. | poration submits this statement for the purpose<br>tion's board of directors. I hereby accept the a | ppointment as registered              |
| SIGNATURE                                    |   |  |                                  |                       |   |                                       |
| 12.  | Signature, typed or printed name of registere OFFICERS                | ed agent and title if applicable. (NO<br>S AND DIRECTORS                 | DTE: Registered A                | gent signature requi  | red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A  |                                       |
| TITLE  | D   | DELETE   | 1.1 TITLE                        |                       | ADDITIONS/CHANGES TO OFFICERS A   | Change Addition                       |
| NAME   | MARTINEZ, EDWARD J  |  | 1.2 NAMI                         | E                     |   |                                       |
| STREET ADDRESS                               | 331 IVES DAIRY ROAD S   | STE 8  | 1.3 STRE                         | ET ADDRESS            |   |                                       |
| CITY-ST-ZIP                                  | NO MIAMI BEACH FL 33  |  | 1.4 CITY                         | -ST-ZIP               |   |                                       |
| TITLE  | D   | ☐ DELET <b>e</b>   | 2.1 TITLE                        |                       |   | ☐ Change ☐ Addition                   |
| NAME   | MARTINEZ, DENISE  | TP 6   | 2.2 NAME                         | - 1                   |   |                                       |
| STREET ADDRESS                               | 331 IVES DAIRY ROAD S   |  |                                  | ET ADDRESS            |   |                                       |
| CITY-ST-ZIP<br>TITLE                         | NO MIAMI BEACH FL 33  | DELETE DELETE  | 2.4 CITY<br>3.1 TITLE            |                       |   | Change Addition                       |
| NAME   |   |  | 3.2 NAME                         | ı                     |   | C cumile C vingini                    |
| STREET ADDRESS                               |   |  |                                  | ET ADDRESS            |   |                                       |
| CITY-ST-ZIP                                  |   |  | 3.4. CITY                        | l                     |   |                                       |
| TITLE  |   | ☐ DELETE   | 4.1 TITLE                        |                       |   | ☐ Change ☐ Addition                   |
| NAME   |   |  | 4. 2 NAM                         | E                     |   |                                       |
| STREET ADDRESS                               | ē   |  |                                  | ET ADDRESS            | -   |                                       |
| CITY-ST-ZIP<br>TITLE                         |   | ☐ DELETE   | 4.4 CITY-                        |                       |   | Chaces Large                          |
| NAME   |   | U DECER  | 5.1 TITLE<br>5.2 NAME            | i                     |   | Change Addition                       |
| STREET ADDRESS                               |   |  |                                  | ET ADDRESS            |   |                                       |
| CITY-ST-ZIP                                  |   |  | 5.4 CITY-                        |                       |   |                                       |
| TITLE  |   | DELETE   | 6.1 TITLE                        |                       |   | Change Addition                       |
| NAME   |   |  | 6.2 NAME                         |                       |   | - —                                   |
| STREET ADDRESS                               |   |  | 6.3 STREE                        | T ADORESS             |   |                                       |
| CITY-ST-ZIP                                  |   |  | 6.4 CITY-                        | ST- 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 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 recoiver 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.

CICNATURE.

03/07/10 (200) 152.500