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**PROFIT CORPORATION** ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000102883 (1)

## **FILED** Apr 13 1998 8:00am Secretary of State

		rty MgMt. & Fin	IANCE, INC.						
	ce of Business		Mailing Address				1 1021001 110 10115 5111 02111 20111 20151 11011 03		
1451 W CYPRESS CREEK RD. SUITE 300 PO BOX 4510 FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33338					4510				
	J. 12 44404		US	, _ 00000 1011	•		DO NOT WRITE IN THIS	SPACE	
,							3. Date Incorporated or Qualified		
2. Principal I	Place of Busine	nss	2a. Mailing Addres	es.			12/19/1996 4. FEI Number	I	pplied For
21			26				65-0733136		ot Applicable
Suite, Apt	. #, etc.		Suite, Apt. #, etc.						Additional
22			27				5. Certificate of Status Desired	Fee R	equired
City & Sta	te		City & State				6. Election Campaign Financing	<b>*</b>	May Be
23		7.7.	28				Trust Fund Contribution		to Fees
Zip	-	Country	Zip	}	Country	'	8. This corporation owes or has paid the cu		itangible 【 No
24		25   and Address of Current	Registered Agent	30	<del></del>		Personal Property Tax due June 30.  10. Name and Address of New Registered		21 140
A	ENENATI, ISA		g		81	Name	150 Limite and Limited at 110 to 110 to 100		
	8 NE 19TH						(2.0. 2		
WILTON MANORS FL 33305					82 Street Addre		dress (P.O. Box Number is Not Acceptable)		
					83				
					84	City		<b>85</b> Zip	Code
							Fi	<b>∟</b>	
11. Pursuant office or	to the provision	ons of Sections 607,0502 ant, or both, in the State of	and 607.1508, Florida of Florida Such change	Statutes, the	e above ized by	e-named cor the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the ap	of changing i	its registered registered
agent. L	am familiar witi	h, and accept the obligat	tions of, Section 607.05	605, Florida S	Statutes	s. '		•	ŭ
SIGNATURE	Signature, bypedic	proted name of registered agen	t and tille if annie able	(NOTE Regist	tered Ane	int signature remi	ulrad when reinstating) DATE	<del> </del>	
12.	Organicae, typicae	OFFICERS AND				ar alfadra a lada	med in on temptating,		
		OFFICENS AND	DIRECTORS	B 1	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12
TITLE	PVST	OFFICENS AND	DELE		.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12 Addition
TITLE NAME	BENENA	TI, ISABEL S		TE 1.			ADDITIONS/CHANGES TO OFFICERS AN		
· ·	BENENA 136 NE	TI, ISABEL S 19TH CT F-114		TE 1.	.1 TITLE	ADDRESS	ADDITIONS/CHANGES TO OFFICERS AN		
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r nereby 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 armual 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 changoli, or on an attachment with an address.

GNATURE:

SIGNATURE