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

**PROFIT** CORPORATION ANNUAL REPORT-

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

**FILED** May 14 1998 8:00am Secretary of State

Principal Plac	_	IPRISES, INC.	Mailin	465 (1)			· · · <u>-</u> ·			
7330 S.W. 112TH COURT 7330 S.W. 112TH COURT										
MIAMI FL 33	173		MIAM	II FL 33173				DO NOT WRITE IN THIS	SPACE	
								3. Date Incorporated or Qualified	•	
		·····			·			03/13/1997		
2. Principal Place of Business			<del></del> 3	2a. Mailing Address				4. FE! Number	<u>L</u>	Applied For
Suite, Apt. #, etc.				Suite Apt. #, etc.						Vot Applicable
22	m, etc.		27	<del></del>				5. Certificate of Status Desired	7	Additional Required
City & State	.0			y & State	_			6. Election Campaign Financing		0 May Be
23			28	,				Trust Fund Contribution		d to Fees
Zip		Country	Zip	,	Cou	nlry		8. This corporation owes or has paid the co	urrent year li	ntangible
24		25	29		30			Personal Property Tax due June 30.		<b>№</b> No
		and Address of Curr	rent Registere	d Agent				10. Name and Address of New Registered	Agent	
	IETTY, NAF					B1 Name	9			
		2TH COURT					et Address (P.O. Box Number is Not Acceptable)			
MI	AM) FL 331	173				63	- · · · · · · · · · · · · · · · · · · ·			
						63				
						84 City		F	85 Zip	Code
11. Pursuant	to the provis	illos of Sections 607.0	502 and 607 1	508 Florida Statut	es the at	love-name	d corpo	vation submits this statement for the purpose	ef changing	ite registered
office or r	egistered ag	pentage both, in the Sta	ate of Florida. S	Such change was	authorized	by the co	rporatio	ration submits this statement for the purpose n's board of directors. I hereby accept the ap	pointment a	is registered
1	'''' <b>'''''''</b>		nganons of, se RAYANA			lies.		1	N. 00	>
SIGNATURE\	Confluent types	· 10 (17	. FI 7 F11VF5					f		
46		or printed name of registered		S HETT dicable. (NOT		Agent signatu	re required	Umage: Image: I	24-98	
12.		or printed name of registered		olicatole. (NOT RS		Agent signatu		when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN		RS IN 12
TITLE	D	or printed name of registered	agent and tille it app	olicable. (NOI	F: Hegistered		<b>D</b> ·	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN		PRS IN 12
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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 supplier 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 inceiver 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 changes or of unsutacimient with an address.