


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

FILED

Apr 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000028763 (5) 1. Corporation Name FIRST COMMERCE, INC.			
Principal Place of Business 9450 SW 81 AVE MIAMI FL 33158		Mailing Address 9450 SW 81 AVE MIAMI FL 33158	
2. Principal Place of Business 21 10431 SW 88 street Suite, Apt. #, etc. D404 City & State Miami, FL Zip 33176 Country USA		2a. Mailing Address 26 10431 SW 88 street Suite, Apt. #, etc. D404 City & State Miami FL Zip 33176 Country USA	
3. Date Incorporated or Qualified 03/27/1997		4. FEI Number 650762118	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent GOLDBERG, GEORGE Z 757 NW 27TH AVE, 3RD FL MIAMI FL		10. Name and Address of New Registered Agent 81 Name John Sagarrabay, CPA 82 Street Address (P.O. Box Number is Not Acceptable) 515 SW 63 Court 83 84 City Miami FL 85 Zip Code 33144	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE John D. Sagarrabay, CPA 4/22/98 (NOTE: If signed by agent, signature required when reinstating)			
12. OFFICERS AND DIRECTORS TITLE D NAME LATORRE, RICHARD STREET ADDRESS 9450 SW 81 AVE CITY-ST-ZIP MIAMI FL 33158 TITLE D NAME LATORRE, ALBERT F STREET ADDRESS 9450 SW 81 AVE CITY-ST-ZIP MIAMI FL 33156 TITLE D NAME QUINTANA, DAISY STREET ADDRESS 8101 CAMINO REA, SUITE C216 CITY-ST-ZIP MIAMI FL 33143 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE (P) President, CPA 1.2 NAME Richard Latorre 1.3 STREET ADDRESS 10431 SW 88 street, D404 1.4 CITY-ST-ZIP Miami, FL 33176 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	



DO NOT WRITE IN THIS SPACE

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 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 if an attachment with an address.

SIGNATURE:

Richard Latorre

4/20/98 (305)271-9698

CR2E034 (4/97)