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

PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	IAL REPORT 1998	T Secretary of S DIVISION OF CORPO			3	ons	Secretary of State			
		9700041 On Services, Inc					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Lili Sdin albi	11 ((4) 11 10 (15) 1 14	i Belger ek Gi
Principal Place			Mailing Address							
9506 SO RED Miami Fl 331			9506 SO RED ROAD MIAMI FL 33156				DO NOT WRIT 3. Date Incorporated or Qualified	IN THIS	SPACE	 1
2. Principal Pi	ace of Business	Pro-171	28. Mailing Address 26				05/12/1997 4. FEI Number 65-075	3 2 5		plied For t Applicable
Suite, Apt	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A	Additional
City & State		28]					6- Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip 24	25 Countr	29]	+ · · · · · · · · · · · · · · · · · · ·				This corporation owes or has p Personal Property Tax due Juni Name and Address of New Ri	30. [Yes	Dible
9. Name and Address of Current Registered Agent OESTERLE, DOUGLAS W 9506 SO RED ROAD MIAMI FL 33156					81 82	Name Street Add	dress (P.O. Box Number is Not Accepta	=======================================		
	MI FL 93130		- E			City			85 Zip (Code
 Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth. 					ove by	named co	rporation submits this statement for the ation's board of directors. I hereby acce	FL purpose of pt the app		
agent Far SIGNATURE	n familiar with, and acc	cept the obligations of, So	ection 607.0505, Flo	orida Statu	ulos.		uired whon reinstaling)	DATE		
12.		FLICERS AND DIRECTO		13.	rigo	it signature requ	ADDITIONS/CHANGES TO OFFI		DIRECTOR	S IN 12
TITLE	D		DELFTF	1 1 111	LĒ				Change	Addition
NAME	Silverman, Her			1.2 NA/		Į.				[;
STREET ADDRESS	9506 SO RED RO	AD	1.		1.3 STREET ADDRESS					li li
CITY-ST-ZIP	MIAMI FL 33156			1.4 CIT		- ZIP			-	
TITLE	D DUNEDMAN OIGE		DELFTE	2 1 111					Change	Addition
NAME STREET ADDRESS	SILVERMAN, GISE 9506 SO RED RO MIÁMI FL 33156				REET #	ADDRESS				
CITY-SI-ZIP TITLE	MIAMI PL 33130	***************************************	DELETE	2 4 CH 3 1 TH		T-21P			Change	Addition
NAME				3.2 NA						
STREET ADDRESS				1		ADDRESS				. }
CITY ST-ZIP				3.4. CI						1
TITLE,	-		DOLLETE	4.1 7(1)					Change	Addition
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TITLE			DELETE	5.4 CIT 6 1 TITI		-211			Change	Addition
NAME				62 NA)		1				
STREET ADDRESS						ADDRESS				

64 CITY-ST-ZIP

14. Thereby certify that the information supplied with this hing 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 symptomental 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 on an appelment with an address.

SIGNATURE:

FILED

Mar 10 1998 8:00am