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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000044366 (7)

AGENCY FOR INVESTMENTS, DEVELOPMENT AND ADVISING

FILED May 07 1998 8:00am Secretary of State

CORP. Principal Place of Business Mailing Address 1768 LEN DRIVE POST OFFICE BOX 31965 JUNO BEACH FL 33408 PALM BEACH GARDENS FL 33410 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/20/1997 2. Principal Place of Business 2a. Mailing Address Applied For 5-*0453422* 21 1897 Palm Beach Lakes Blvd Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 226 City & State City & State \$5.00 May Be 6. Election Campaign Financing West Palm Beach, FL 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 33409 24 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name AMERILAWYER CHARTERED Warner & Associates, CPA, PA 343 ALMERIA AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) **CORAL GABLES FL 33134** 1897 Palm Beach Lakes Blvd 83 Suite 226 84 City Zip Code West Palm Beach 33409 11. Pursuant to the provisions office or registered agen agent. I am familiar with, ions of Sections 607,0502 and 607,1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered left, or both in the \$200 of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered th, and accept the appointment as registered th, and accept the appointment as registered the supplied of the properties of the appointment as registered Signature, type-d or Fi (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PSTD DELETE Addition TITLE 1.1 TITLE Change **BOZIC, DUSAN** 1.2 NAME CR2E034 1768 LEN DRIVE STREET ADDRESS 1.3 STREET ADDRESS JUNO BEACH FL 33408 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change 2.1 TITLE Addition TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 14. Thereby certify that the information supplied with this filling 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 charged or on an attack ment with an address.