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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000048805 (0)

ESTEIN COMMONS CORP.

Principa	al Place of Business	Mailing Addres	s								
C/O E	nternational dr. Stein & Associates. USA: Lt IDO FL 32819	D. 5211 INTERNA D. C/O ESTEIN 8 ORLANDO FL	A880CIATES. USA	l. L7	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/03/1997						
<u>⊢</u>	cipal Place of Business	<u> </u>	2a. Mailing Address		4. FEI Number Applied For	<u> </u>					
Suite	, Apt. #, etc.		Suite, Apt. #, etc. 27		59-3450086 Not Applicab 5. Certificate of Status Desired						
City o	& State	City & State	}		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees						
Z ip 24	Country 25	Zip 29	30 Cou	ntry	ntry 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes X No						
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
LEWIS, VEGOSEN, ROSENBACH & SILBER, P.A. 10TH FL., 500 S. AUSTRALIAN AVE. WEST PALM BEACH FL 33401					81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	Code					
					FL T	_					
offic	e or registered agent, or both	ons 607.0502 and 607.1508, Flori in the State of Florida. Such char opt the obligations of, Section 607	nge was authorizer	d by	pove-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered utes.	d					
SIGNAT	URE					_					

agentita	in tamiliar with, and accept the obligations of, section	11 007 .03 0 3, FIOHL	aa statutes.				
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	la. (NOTE: R	legistered Agent signature	required when reinstating)	DATE		
12.	· · · · · · · · · · · · · · · · · · ·				S/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	Ď	DELETE	1.1 TITLE		☐ Change	Addition	
NAME	ESTEIN, LOTHER		1.2 NAME	•			
STREET ADDRESS	5211 INTERNATIONAL DR.		1.3 STREET ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32819		1.4 CITY-ST-ZIP				
TITLE		DELETÉ	2.1 TITLE		Change	Addition	
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP			2. 4 CITY-ST-ZIP				
TITLE		DELETE	3.1 TITLE		Change	Additio	
NAME			3.2 NAME	•	- •		
STREET ADDRESS			3.3 STREET ADDRESS				
			3.4. CITY-ST-ZIP				
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE		Change	Additio	
NAME			4. 2 NAME				
			4.3 STREET ADDRESS				
STREET ADDRESS							
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change	Addition	
		occere					
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP		DC) ETC	5.4 CHTY - ST - ZIP		Change	Additio	
TITLE		☐ DELE TE	6.1 TITLE		Change	Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY - ST - ZIP				

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 on an attachment with the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certificate in Section 119.07(3)(ii), Florida Statutes. I further certificate in Section 119.07(3)(ii), Florida Statutes. I further certificate in Section 119.07(3)(

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Mar 13 1998 8:00am

Secretary of State