SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700050286 (8)

ANANIAS, INC. Principal Place of Business Mailing Address 10287 N.W. 46TH STREET 10287 N.W. 46TH STREET SUNRISE FL 33351 SUNRISE FL 33351 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Zip Country Country 8. This corporation owes or has paid the current year Intengible X Yes 29 30 Personal Property Tax due June 30. 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CHANG, NANCY 11871 ROYAL PALM BOULEVARD 82 **SUITE 304** 83 CORAL SPRINGS FL 33065 1NG5 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. Vancy SIGNATURE (NOTE: Registered Agent signature required Signature, typed or printed name of gislered agent and title if app (2/38)OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. 1.1 TITLE TITLE D DELETE Change Addition CR2E034 758 NW82 NDAVENUE CORAL SPRINGS, FL 33071 NAME CHANG, NANCY 1.2 NAME 11871 ROYAL PALM BOULEVARD. #304 STREET ADDRESS 1.3 STREET ADDRESS CORAL SPRINGS FL 33065 1.4 CITY-ST-ZIP CITY-ST-ZIP TITLE 2.1 TITLE DELETE HEITMANN, JOERN 2.2 NAME 9481 BAY DRIVE SURFSIDE, FL 33154 NAME 1175 96TH STREET, #25 STREET ADDRESS 2.3 STREET ADDRESS **BAY HARBOR ISLAND FL 33154** CITY-ST-ZIP 2.4 CITY-ST-ZIP Change TITLE __] DELETE 31 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change ___ Addition 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE 5.1 TITLE DELETE _ Change Addition 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE TITLE DELETE Addition ___ Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 suppliemental 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 of the receiver or rustee 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 or an attachment with an address.

FILED

Sep 17 1998 8:00am

Secretary of State