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

CITY-ST-ZIP

FILED **PROFIT** May 26 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P97000051405 (3) FDM & SON INVESTMENTS, INC. Principal Place of Business Mailing Address 13780 SOUTHWEST 56 STREET 13780 SOUTHWEST 56 STREET SUITE 210 SUITE 210 DO NOT WRITE IN THIS SPACE **MIMAI FL 33175** MIMAI FL 33175 3. Date Incorporated or Qualified 06/11/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zìo Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Yes 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent AMERILAWYER CHARTERED -DINORDH 81 INORNI 343 ALMERIA AVENUE 82 **CORAL GABLES FL 33134** 83 84 City .05b2 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered by the corporation of Section 607.0505, Florida Statutes. 11. Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent. I am familiar with and accept the SIGNATURE (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PD TITLE DELETE 1.1 TITLE Change Addition NAME MONTOTO, FRANK D 1.2 NAME 13780 SW 56 ST, STE 210 STREET ADDRESS 1.3 STREET ADDRESS **MIMAI FL 33175** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition STD Change TITLE 2.1 TITLE MENDEZ, DINORAH A NAME 2.2 NAME 13780 SW 56 ST, STE 210 STREET ADDRESS 2.3 STREET ADDRESS MIMAI FL 33175 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-\$1-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE Change Addition 51 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE 61 TITLE Change Addition NAME 62 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 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 an address.

4/98 /205/397 11715