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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000055177 (4) 3301 CORP-

**FILED** Feb 25 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				- I COULSON THE COMMISSION OF HE BOLL OF THE CONTROL	BINDL OLIGE INDIA TRANC INDI INDI
7220 SOUTHWEST 61 STREET MIAMI FL 33143		7220 SOUTHWEST 61 STRI	EET		
		MIAMI FL 33143		DO NOT WRITE IN TH	IC COACE
				3. Date Incorporated or Qualified	IS SPACE
[ ]				06/24/1997	
2. Principal P	lace of Business	2a. Mailing Address	·	4. FEI Number 14.2	Applied For
21 72-7	205.06151	26 7220 5.0	26154	65 076 3181	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional
22		27		b. Certificate of Status Desired	Fee Required
City & Stat		City & State	1	6. Election Campaign Financing	<b>\$5.00</b> May Be
23 Mia	Country	28 Miam F	Country	Trust Fund Contribution	Added to Fees
Zip 24	<u>⊢</u> ¬ •••• ,	29 T 33143	¬ ´	<b>8.</b> This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible  Yes No
24	25 Name and Address of Currer	· · · · · · · · · · · · · · · · · · ·	<u> </u>	10. Name and Address of New Registers	
AN	IERILAWYER CHARTERED		81 Name		<del>-</del>
	3 ALMERIA AVENUE		62 Street Addr	ess (P.O. Box Number is Not Acceptable)	
1	RAL GABLES FL 33134		PS Stider Wright	ess (P.O. Box Number is Not Acceptable)	
]			83		
			84 City		. 85 Zip Code
			OT City	F	Zip code
agent La	egistered agent, or bottl, in the State in familiar with, and accept the oblig Americal Lawyer Companies typed or professional agents agested agents.	ations of, Section 607.0505, Florid	indized by the corporation and Statutes.	ion's board of directors. I hereby accept the a	
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PTD	DELFTE	1.1 TITLE		☐ Change ☐ Addition
NAME	verster, Jeanette		1.2 NAME		
STREET ADDRESS	7220 SOUTHWEST 61 STREE	ET	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33143		1.4 CITY - ST - ZIP		
TITLE	SD	☐ DECETE	2.1 TITLE		☐ Change ☐ Addition
NAME	VERSTER, MARTIN		2 2 NAME		
STREET ADDRESS	7220 SOUTHWEST 61 STREE	E1	2.3 STREET ADDRESS	**	
CITY-ST-ZIP	MIAMI FL 33143	DELETE	2.4 CITY-ST-ZIP		Change Addition
TITLE NAME		[1] Official	3.1 TITLE 3.2 NAME		Change Addition
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		1
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		<del></del>	4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADORESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CiTY-ST-ZiP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		

14. Thereby 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 pame appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

6671824