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PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700056755 (6)

JULY PROJECT IV CORP.

FILED

98 JAN 22 PM 12: 1 P

SECRETARY OF STATE TALLAHASSEL FLORIDA



Mailing Address Principal Place of Business 1428 BROSKELL AVE. 8TH FLOOR MIAM FL 3031 1428 BRICKELL AVE. 8TH FLOOR DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/27/1997 2a. Mailing Address 2. Principal Place of Business Applied For ame Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 8. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Ziρ Zip Country 8. This corporation owes or has paid the current year Intangible Personal Properly Tax due June 30. Yes

10. Name and Address of New Registered Agent 24 25 29 30 9. Name and Address of Current Registered Agent 81 Name LITTMAN, ERIC P 1428 BRICKELL AVE, 8TH FLOOR Address (P.O. Box Number is Not Acceptable) MIAMITPL 33131 83 84 11. 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. SIGNATURE (NOTE: Registered Agent's gnature required when reinstating) Signature, typed or similar name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. 7895 SW 104 Street Solle 210 PSD DELETE 1.1 TITLE **Change** Addition TITLE LITTMAN, ERIC P 1.2 NAME NAME 1428-BRICKELL AVE. 8TH FLOOR 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33181 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE ☐ Change TITLE 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 600002408936 CITY-ST-ZIP 2. 4 CITY-ST-ZIP -01/22/98-01065-028 DELETE 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 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 is supplied 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 constant of the receiver or trustee ompowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if plants of the constant of the cons

CENCE LITTMAN

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