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

PROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jun 04 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

		TEVENS, I			00709 (1	')						
Principal Place of Business Mailing Add					Mailing Address	ss				- - * 1981/1981 1/9 (0)11 (100) 00() 00() 00() 40(0) 00() 40() 00() 00() 00() 00() 00()	H	
227	2221 N.E. 164TH STREET				2221 N.E. 164TH STREET							
SU	SUITE #358				SUITE #358					DO NOT WOITE IN THIS COACE		
NORTH MIAMI FL 33160				NORTH MIAMI FL 33160				}	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
									}	06/26/1997		
2. F	Principal P	Place of Business			2a. Mailing Address					4. FEI Number Applied F	or	
21					26					650 204306 Not Applie		
	Suite, Apt #, etc.				Suite, Apt. #, etc.					\$8.75 Addition		
22				27						5. Certificate of Status Desired		
	City & State			,	City & State				}	6. Election Campaign Financing \$5.00 May Bo		
23				28	28					Trust Fund Contribution Added to Fees		
	Zip	}	Country	\	Zip I	<u> </u>	ountry		}	8. This corporation owes or has paid the current year Intangible	†	
24	 -		25 and Address of C	29	I	30				Personal Property Tax due June 30. Yes No. 10. Name and Address of New Registered Agent	14	
	OT			miterit negi	Present Whenir		81	Name		TO. Name and Address of New Registered Agent	pored	
	STEVENS, WILLIAM GERARD						82					
2221 N.E. 164TH STREET Suite #358								Street	Addres	ss (P.O. Box Number is Not Acceptable)		
NORTH MIAMI FL 33160												
HOUTH WINGH LE 92 100												
							84	City		FL 85 Zip Code		
	office or re	registered age im familiar wit	ent, or both, in the h, and accept the	State of Flor obligations	ida. Such change work, Section 607.0505	as authori , Florida S	zed by itatules	the cor s.	poration	oration submits this statement for the purpose of changing its regist on's board of directors. I hereby accept the appointment as registe	ered red	
12.		Signature, typical	Of LICER	S AND DIRE			3.	nt signatur	o required	d wher reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	····	
TITLE					DOLLFIE		TITLE		P	Change Lange		
	NAME							1.2 NAME WI		Iliam G. Stevens		
	STREET ADDRESS			1		1.3 STREET ADDRESS		22:	21 N.E. 164th Street, Swite # 358			
CITY-	-ST-ZIP					1.4	4 CHY-S	1-7IP	Nort	th miami, FL 33160		
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NAME						62 NAME			-06/11/9801100011			
STREE	ET ADDRESS					63	3 STALET	ADDRESS	1	***200.00		
CITY-ST-ZIP							6.4 Crty - ST - ZIP					
	indicated	on this appua	d report or supplier	mental annes	al report is true and	accurate a	and the	at miv sic	nnature -	section 119.07(3)(i), Florida Statutes. I further certify that the information shall have the same legal effect as if made under cath, that I am a red by Chapter 607. Elorida Statutes; and that my name appears in	ลก	