

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

FILED  
Apr 23 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000057010 (5)**

1. Corporation Name

**SHERWIN ROSS, P.A.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business <b>3043 GRAND AVE., PH II MIAMI FL 33133</b>		Mailing Address <b>3043 GRAND AVE., PH II MIAMI FL 33133</b>	
<b>2. Principal Place of Business</b>		<b>2a. Mailing Address</b>	
<b>21</b>		<b>26</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
<b>22</b>		<b>27</b>	
City & State		City & State	
<b>23</b>		<b>28</b>	
Zip	Country	Zip	Country
<b>24</b>		<b>29</b>	
<b>25</b>		<b>30</b>	

**3. Date Incorporated or Qualified**

**06/27/1997**

**4. FEI Number**

**65-0763496**

Applied For

Not Applicable

**5. Certificate of Status Desired**

☐ **\$8.75 Additional  
Fee Required**

**6. Election Campaign Financing  
Trust Fund Contribution**

☐ **\$5.00 May Be  
Added to Fees**

**8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.**

☐ Yes ☐ No

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

**CORPORATE CREATIONS ENTERPRISES, INC.  
4521 PGA BLVD., #211  
PALM BEACH GARDENS FL 33418**

**81 Name**

**SHERWIN ROSS**

**82 Street Address (P.O. Box Number is Not Acceptable)**

**3043 GRAND AVENUE, PH 2**

**83**

**84 City**

**MIAMI**

**FL**

**85 Zip Code**

**33133**

**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

**SHERWIN ROSS PRES.**

**SHERWIN ROSS**

**4/09/98**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

<b>12. OFFICERS AND DIRECTORS</b>		<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>	
TITLE	<b>D</b>	1.1 TITLE	<b>PRESIDENT / SEC.</b>
NAME	<b>ROSS, SHERWIN</b>	1.2 NAME	
STREET ADDRESS	<b>3043 GRAND AVE., PH II</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI FL 33133</b>	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	<b>VICE PRESIDENT / TREAS / DIR</b>
NAME		2.2 NAME	<b>SANDRA FISHER / ROSS</b>
STREET ADDRESS		2.3 STREET ADDRESS	<b>3048 GRAND AVE. PH2</b>
CITY-ST-ZIP		2.4 CITY-ST-ZIP	<b>MIAMI, FL 33133</b>
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.**

SIGNATURE:

**SHERWIN ROSS**

**4/09/98**

**305-446-2322**

CP2E034 (10/97)