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Feb 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000058675 (4)

1. Corporation Name

WAVE TECH SOUTH CORP., INC.

Principal Place of Business

10548 SW 8TH ST
MIAMI FL 33174

Mailing Address

10548 SW 8TH ST
MIAMI FL 33174



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/03/1997	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 05-0763830	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Country	29	Country	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	
MIGUEL, DANIEL 1761 W HILLSBORO BLVD SUITE 205 DEERFIELD BEACH FL 33442				81 Name Daniel Miguel 82 Street Address (P.O. Box Number is Not Acceptable) 8501 S.W. 20TH/terr. 83 84 City MIAMI FL 85 Zip Code 33155	

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PROSD.	1.1 TITLE	President
NAME	Daniel Miguel	1.2 NAME	Daniel Miguel
STREET ADDRESS	8501 S.W. 20TH/terr.	1.3 STREET ADDRESS	8501 S.W. 20TH/terr.
CITY-ST-ZIP	MIAMI FL 33155	1.4 CITY-ST-ZIP	MIAMI FL 33155
TITLE	MARCO MARQUEZ	2.1 TITLE	MARCO MARQUEZ VICE-P.
NAME	MARCO MARQUEZ	2.2 NAME	MARCO MARQUEZ
STREET ADDRESS	21250 NE 9TH/CT #4	2.3 STREET ADDRESS	21250 NE 9TH/CT #4
CITY-ST-ZIP	N.M. BCH FL 33179	2.4 CITY-ST-ZIP	N.M. BCH FL 33179
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:

1-28-98

CR2E034 (10/97)