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

**PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham FILED **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS 98 JAN 22 PM 12: 21 DOCUMENT #
1. Corporation Name P97000060191 (8) SECRETALLY OF STATE TALLAHASSEE, FLORIDA AUGUST PROJECT III CORP. Principal Place of Business Mailing Address 1428 BRICKELL AVE 8TH FLOGS MIAMI FL 33131 1428 BRICKELL AVE 8TH FOOOR MIAM FN33131 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/10/1997 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For SANI ナッハ Not Applicable Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired 22 27 Fee Required City & State \$5.00 May Be 6. Election Campaign Financing 26 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes \square \text{No} No 29 30 Personal Property Tax due June 30. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LITTMAN, ERIC P 1428 BRICKELL AVE O. Box Number is Not Acceptable) 82 8TH FLEOR 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** Signature, typed of registere, agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PSD \_\_ DELETE TITLE Change 1.1 TITLE \_\_\_ Addition 7695 SW104 LITTMAN, ERIC P NAME 1.2 NAME ruite 210 1428 BRICKELL AVE, 8TH FLOOR STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33131 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP 900002408555 Addition -01/22/98--01065--028 DELETE TOTALE 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS \*\*\*\*150.00 \*\*\*6150.00 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 THLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 4.4 CITY - ST - ZIP DELETE TITLE Change 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-S1-ZIP

6.4 CITY - S1 - 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 suppliemental 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 justee 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 all achiment with an address.

6.1 TITLE

6.2 NAME

**6.3 STREET ADDRESS** 

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Addition