

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

FILED
May 17, 1999 8:00 am
Secretary of State

05-17-1999 90064 027 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000068112

1. Corporation Name
DADE CORPORATE SERVICES, INC.



Principal Place of Business
2300 CORAL WAY
STE 103
MIAMI FL 33145
US

Mailing Address
2300 CORAL WAY
STE 103
MIAMI FL 33145
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/06/1997

4. FEI Number
65-0775788

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 the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business
21

2a. Mailing Address
26

Suite, Apt. #, etc.
22

City & State
23

Zip Country
24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLIAMS, VIVIAN
2300 CORAL WAY
MIAMI FL 33145

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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 of 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 obligation of Section 607.0505, Florida Statutes.

SIGNATURE *Vivian Williams, President Dade Corporate Services* 4/29/99
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	WILLIAMS, VIVIAN	
STREET ADDRESS	2300 CORAL WAY	
CITY-ST-ZIP	MIAMI FL 33145	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	WILLIAMS, V	
STREET ADDRESS	2300 CORAL WAY, STE 103	
CITY-ST-ZIP	MIAMI FL 33145	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	ORTEGA, A	
STREET ADDRESS	2300 CORAL WAY STE 111	
CITY-ST-ZIP	MIAMI FL 33145	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	DVPT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Aileen Ortega	
3.3 STREET ADDRESS	2300 Coral Way Ste 111	
3.4 CITY-ST-ZIP	Miami, Florida 33145	
4.1 TITLE	DVPS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Maria Lopez	
4.3 STREET ADDRESS	2300 Coral Way	
4.4 CITY-ST-ZIP	Miami, Florida 33145	
5.1 TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Linda Larrea	
5.3 STREET ADDRESS	2300 Coral Way Ste 111	
5.4 CITY-ST-ZIP	Miami, Florida 33145	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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, with all other like empowered.

SIGNATURE: *Linda Larrea* LINDA LARREA, DIRECTOR 4-26-99 3058555558

CR2F034 (1/98)