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

**PROFIT** CORPORATION **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED

98 JAN 22 PH 12: 23

	MBER PROJECT I CORP.	10072960 (2)			SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Plac	e of Business	Mailing Address	Mailing Address			
7695 S.W. 104TH STREET		7695 S.W. 104TH STREET				
SUITE 210		SUITE 210				
MIAMI FL 33156		MIAMI FL 33156			DO NOT WRITE IN THIS SPACE	۰,
					3. Date Incorporated or Qualified 08/22/1997	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For	4
21		26			Not Applicable	4
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired See Regulred Fee Regulred	
City & State		City & State				4
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country		Zip Country		v	8. This corporation owes or has paid the current year Intangible	1
24	25	29	30	•	Personal Property Tax due June 30. Yes No	1
	9. Name and Address of Curre	· · · · · · · · · · · · · · · · · · ·			10. Name and Address of New Registered Agent	1
LIT	TMAN, ERIC P		81	Name		٦
	S S.W. 104TH STREET		82	Street Arida	ress (P.O. Box Number is Not Acceptable)	-{
SU	TE 210			ON OUT TRABE	obo (i.i.o. Box Maribol to Mot Mocophable)	_
MIA	MI FL 33156		83			1
			84	City	85 Zip Code	┥
					FL	
office or re	o the provisions of Sections 607.05 egistered agont, or both, in the Stat m familiar with, and accept the obli	e of Florida. Such change was a	uthorized b	y the corporati	noration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or prieted name of registered a	gest and ore it applicable (NOT)	Registered Ag	ent signature requir	red when reinstating) DATE	J
12		AND DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	]
TITLE	DPS	☐ DELETE	1,1 TITLE		Change Addition	
NAME	LITTMAN, ERIC P		1.2 NAME			
STREET ADDRESS			1.3 STREET ADDRESS		1000024089418	Į.
CITY-ST-ZIP	MIAMI FL 33156		1.4 CITY - 1	ST - 71P	1000024089418 -01/22/9801065028 ***6150.00 ****150.00	4
TITLE	<del></del>		2.1 TITLE		***6150.00 ****150.00	ľ
NAME			2 2 NAME			
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP TITLE	DELETE		2. 4 DITY - 3.1 TITLE	SI-ZIP	Change Addition	4
NAME	_ office		3 2 NAME	1	Onenige Addition	Ì
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			34. CITY-		NA L	
TITLE			4 1 TITLE	JI-14	Addition	┨
NAME			4. 2 NAME		Addition	
STREET ADDRESS			4.3 STREET ADDRESS		<b>Y D</b>	1
CITY-ST-ZIP			4.4 City-St-ZiP			1
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition	1
NAME			5.2 NAME			ļ
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - 5	ST-ZIP		
TITLE			6.1 TOLE		Change Addition	1
NAME	AF		6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		ĺ
CITY-ST-ZIP			6.4 CITY - 9			
14. I hereby c	ertify that the information supplied	with this filing does not qualify fo	r the exemp	tion stated in t	Section 119.07(3)(i). Florida Statutes. I further certify that the information	1

indicated on this annual report or supplemental armual 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 charged con an attachment with an address.

ERICP, LITTMAN