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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # 1. Corporation Name P97000083023 (6)

SUNBELT MANAGEMENT SERVICES, INC.

Principal Place of Business

Mailing Address

701 BRICKELL AVE

701 BRICKELL AVE

FILED Mar 09 1998 8:00am Secretary of State



SUITE 3000 MIAMI FL 331	131	SUITE 3000 MIAMI FL 33131		DO NOT WRITE IN THIS SPACE
	•			3. Date Incorporated or Qualified
				09/25/1997
	lace of Business	2a. Mailing Address		4. FEI Number Applied For
	10 OCEAN BRIVE	26 510 OCUM	J DRIVE	65-0814504 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
City & Stat		City & State		6. Election Campaign Financing \$5.00 May Be
	IAMI BOACH, FL	1.0	ACH , FL	Trust Fund Contribution
¬ ^{Zip} つっっ	139 25 USA	33139	Country	8. This corporation owes or has paid the current year Intangible
24 33	9. Name and Address of Current	29	30 USA	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
44.17		T	81 Name	(U. Hante and Addiess of New Hagistoles Agent
	RASTATE REGISTERED AGENT C	ORPORATION		
701 BRICKELL AVE SUITE 3000			82 Street A	Address (P.O. Box Number is Not Acceptable)
	. <u> </u>		83	
MIA	AMI FL 33131			
			84 City	FI 85 Zip Code
44 Purcuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statute	s the shove-named	
office or r	egistered agent, or both, in the State of	Florida. Such change was au	uthorized by the corp	corporation submits this statement to the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obligati	ons of, Section 607,0505, Flor	rida Statutes.	
SIGNATURE	Signature, typed or privited name of registered agent	and title it applicable (NOTE:	Registered Agent signature	required when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		DELETE	1.1 TITLE	P/P
NAME			1.2 NAME	BRIAN SHERMAN LI CHANGE LE AGGILLON
STREET ADDRESS			1.3 STREET ADDRESS	510 OCUAN DRIVE
CITY-ST-ZIP			1.4 CITY-ST-ZIP	MIAMI BUTACH, FLORIDA 3313)
TITLE		DELETE	2.1 TITLE	S/T Change Addition
NAME			2.2 NAME	BERNARD SIEGEL Change LyAddition 510 OCEAN DRIVE
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	MIAMI BUACH, FLORIDA 33139
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELET é	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	A 3
TITLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	12/0
STREET ADDRESS			5.3 STREET ADDRESS	/ D ³ / 5
CITY-ST-ZIP		D 64. 848	5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	
NAME			6.2 NAME	-03/09/9801013026
STREET ADDRESS			6.3 STREET ADDRESS	***150.00
City.St.7ip			64 CiTY-ST-ZIP	대학교가 중 스타트의 등 소마트의

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. BERNARD SIEGEL

1/00