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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000084467 (4)

MILESTONE TAMPA MANAGEMENT, INC.

Principal Place of Business Mailing Address C/O MILESTONE CAPITAL CORPORATION C/O MILESTONE CAPITAL CORPORATION 2300 W SAMPLE ROAD STE 208 2300 W SAMPLE ROAD STE 208 DO NOT WRITE IN THIS SPACE POMPANO BEACH FL 33073 POMPANO BEACH FL 33073 3. Date Incorporated or Qualified 09/30/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 29 ☐ Yes 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MEDNICK, SANDER Name C/O MILESTONE CAPITAL CORPORATION 82 Street Address (P.O. Box Number is Not Acceptable) 2300 W SAMPLE ROAD STE 208 83 POMPANO BEACH FL 33073 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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. Thereby accept the appointment as registered agent. Familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent Figuature required when reinstalling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DITTE TITLE Change 1.11006 Addition SANDER MEDNIC NAME 2300 W SAMPLE ROAD, SUITE 208 STREET ADDRESS 1.3 STHEFT ADDRESS POMPANO BEACH, FL 33073 CITY-ST-ZIP 14 CRY-\$1-7/P TITLE Поней 211008 Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 C4TY+ST-7IP TITLE DELETE Change Addition 3.1 1/1/14 NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST - 7/P DEFE 4.1 TITLE Change ■ Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - 7IP DLIFIE Change TITLE Addition 5.1 TITUE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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Block 12 or Block 13 if changed, or of

CITY-ST-ZIP

SAUNON MORNINA

14. Thereby certify that the information still plied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes: I further certify that the information indicated on this aurural report is supplemental annual report is supplemental annual report is supplemental annual report is supplemental annual report is five and accurate and that my signature shall have the same legal effect as if made under coath, that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

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and are 3726

**FILED** 

Apr 21 1998 8:00am

Secretary of State