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 Mar 16 1998 8:00am Secretary of State

DOCU	MENT	# P970	00089	545 (2))							
	DUSTRIES				,							
Principal Plac	e of Busines	S	Mailing	Address						O POLOF OLIH UH		
4100 S.W. 14 STREET Miami Fl 33134				4100 S.W. 14 STREET MIAMI FL 33134								
								DO NOT WRITE	IN THIS S	SPACE		
	_							3. Date incorporated or Qualified 10/17/1997				
2. Principal Place of Business				2s. Mailing Address				4. FEI Number		×Ϋ́Ar	plied For	
				28							ot Applicable	
Suite, Apl. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re		
City & Stat	le		City	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added 1		
Zip 24	— I			Zip Cou			S. This corporation owes or has pa Personal Property Tax due June			— · — ·		
	g, Name	and Address of Cu		Agent	1991			10. Name and Address of New Re				
LIT	TMAN, ERI	C P	-			B1	Name					
7695 S.W. 104TH STREET					1	32	Street Addre	ess (P.O. Box Number is Not Acceptab	ile)			
	IITE 210 Ami FL 331	56			1	33			······································			
					[6	34	City		FL	85 Zip (Code	
11 Pursuant	to the provis	ions of Sections 607	0502 and 607 15	08 Florida Statu	tes the shr	2/49-1	amed corp	oration submits this statement for the n		chenging it	s registered	
office or r	registered ag ım familiar wi	ent, or both, in the S th, and accept the o	itate of Florida. Subligations of, Sec	uch change was tion 607.0505, F	authorized lorida Statu	by th	ne corporati	oration submits this statement for the p on's board of directors. I hereby accep	the app	pintment as	registered	
SIGNATURE		or printed name of registere						od when reinstating)	DATE			
12.			AND DIRECTOR		13.			ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12	
TITLE	SPD			DELETE	1.1 TITL	E				Change	Addition	
NAME	MORA,				1.2 NAN	4E	1					
STREET ADDRESS		W. 14 STREET		1.3 ST			DRESS					
CITY-ST-ZIP	M IAMI F	L 33134			1,4 CITY	1-ST-2	ZIP					
TITLE				DELETE	2.1 TITU	E				Change	Addition (
NAME					2.2 NAM	₹E						
STREET ADDRESS					2.3 STR	EET AD	DRESS					
CITY-ST-ZIP				DECETE	2.4 CIT		ZIP			A	1.000	
TITLE NAME				DELETE	3.1 TITL					Change	☐ Addition	
					3.2 NAM 3.3 STRE		pprec					
STREET ADDRESS											Ì	
CITY-ST-ZIP TITLE				☐ DELETE	3.4. CITY 4.1 TITL		ZIP			Change	Addition	
NAME					4. 2 NAN							
STREET ADDRESS					4.3 STRE		DRESS					
CITY-ST-ZIP					4.4 CITY							
TITLE				DELETE	5.1 TITLI	E				Change	Addition	
NAME					5.2 NAM	E					1	
STREET ADDRESS					5.3 STRE	ET AD	DRESS				1	
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·			5.4 CITY	- ST- Z	IP I					
TITLE				☐ DELETE	6.1 TITLE					Change	Addition	
NAME					6.2 NAM							
STREET ADDRESS					6.3 STRE		- 1					
CITY-ST-ZIP	ertify that the	information supplie	d with this filips o	lose not qualify f	6.4 CITY			Section 119 07/3Vi) Florida Statutes 1	further cor	tify that the	information	

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 of 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.

DELLATURE X Secure G. Morr