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

STREET ADDRESS

CITY-ST-ZIP

Jun 24 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Secretary of State Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 1990000 9453 p97000090153 Mailing Address Principal Place of Business 250 Australian Ave S. Same west Rum Beach Fl DO NOT WRITE IN THIS SPACE 33401 3. Date incorporated or Qualified 10120191 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 21 Not Applicable 26 Applied Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution 23 Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name David Layman, Esq. 10 Greenberd Trawig 1111 5. Flagger Dr. Suite 310-E West Pulm Beach Fl 33401 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code 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 or 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 obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition 1.1 TITLE Change TITLE PISTII) NAME 1.2 NAME son Schlesinger STREET ADDRESS 1.3 STREET ADDRESS 112 Hoyt st. CITY-ST-ZIP Blamfood 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE Bernard Green 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS West Ralm & CITY-ST-ZIF 2.4 CITY - ST - ZIP Change Addition TITLE 3.1 TITLE weinstein william NAME 3.2 NAME Nassau Dr. STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Addition Channe TITLE 4 1 TITLE HAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIF DELETE Change Addition THILE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - S1-ZIF 5 4 CITY-ST-ZIP Change DELETE Addition TITLE 61 TITLE NAME 6.2 NAME -06/25/98--01018--028

6.3 STREET ADDRESS

6.4 CITY - ST- ZIP

14. Thereby certify that the information supplied with this filing doos 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 reference empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changod, or on an anathement of the place of the corporation of the c

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