

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000090343 (9)
 1. Corporation Name
PEMBROKE PUB, INC.



Principal Place of Business 2665 SOUTH BAYSHORE DRIVE SUITE 900 MIAMI FL 33133	Mailing Address 2665 SOUTH BAYSHORE DRIVE SUITE 900 MIAMI FL 33133
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2665 S. Bayshore Dr. Suite, Apt. #, etc. 22 Suite 703 City & State 23 Miami, FL Zip 24 33133		2a. Mailing Address 26 2665 S. Bayshore Dr. Suite, Apt. #, etc. 27 Suite 703 City & State 28 Miami, FL Zip 29 33133		3. Date Incorporated or Qualified 10/21/1997		4. FEI Number 65-0788478		Applied For Not Applicable	
Country 25 USA		Country 30 USA		5. Certificate of Status Desired XX \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent RICHARDS, TIMOTHY D ESQ. 2665 SOUTH BAYSHORE DRIVE SUITE 900 MIAMI FL 33133				10. Name and Address of New Registered Agent 81 Name World Corporate Services, Inc. 82 Street Address (P.O. Box Number is Not Acceptable) 2665 S. Bayshore Dr. 83 Suite 703 84 City Miami FL 85 Zip Code 33133			
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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 *Timothy D. Richards* (Signature of agent or registered agent and file 4 applicable) (NOTE: Registered Agent signature required when reinstating) *Pro* DATE *4/3/98*

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	P/S/D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	Richard L. Moses
STREET ADDRESS		1.3 STREET ADDRESS	2665 S. Bayshore Dr., Suite 703
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Miami, FL 33133
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	AS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	Timothy D. Richards, Esq.
STREET ADDRESS		2.3 STREET ADDRESS	2665 S Bayshore DR STE 703
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Miami, Florida 33133-5401
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

CR2E034 (10/97)