## 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

DOCUMENT # 1. Corporation Name P97000090916 (2)

F&G INVESTMENTS OF CORAL GABLES, INC.

**FILED** Apr 20 1998 8:00am Secretary of State



1/5/96

(305)460-6300

Principal Place of Business Mailing Address					f tantiant tie intil tanti entit anter anter anter anter anter anter anter anter anter inne atte inne	
3211 PONCE	DE LEON BLVD	3211 PONCE DE LEON BLVD				
SUITE 301		SUITE 301				DO NOT WRITE IN THIS SPACE
CORAL GABL	ES FL 33134	CORAL GABLES FL 33134				3. Date Incorporated or Qualified
						10/22/1997
2 Principal P	lace of Business	2a. Mailing Address				4., FEI Number Applied For
21		26				65~0790459 Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.				SR 75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	$\vdash$	Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	25 g. Name and Address of Curren	29 29 Agent	30			Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
	LTON, FRANK 11 PONCE DE LEON BLVD					
	HTE 301		82		Street Ad	ddress (P.O. Box Number is Not Acceptable)
	ORAL GABLES FL 33134	8		83		delite - Property - Communication - Communicat
	تحقيق مسامه مستوسد باسته مستوسد سيست مهمور سيست		}	84	City	85 Zip Code
			į	94	City	FL   63   Zip Gode
11. Pursuant	to the provisions of Sections 607.050	and 607.1508, Florida Statu	ites, the ab	ove-	named co	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 ago			1 Agen	it signature red	equired when reinstating) DATE
12.	OFFICERS AND	DELETE	13. 1.1 TH	11.6		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
TITLE	D   Milton, Frank	L. Valle	1.1 111 1.2 NA			Citalige ( recilion
NAME Street Address	\$211 PONCE DE LEON BLVD	STE 201			ADDRESS	•
CITY-ST-ZIP	CORAL GABLES FL 33134	, 012 001		TY-ST		
TITLE	90/10/2 00/10/20 12 00/10/1	DELETE	2.1 TiT		£"	Change Addition
NAME			2.2 NA	ME		
STREET ADDRESS			2.3 ST	REET A	ADDRESS	
CITY-ST-ZIP			2. 4 CI	ITY-\$1	T-ZIP	
TITLE		DELETE	3.1 TH	TITLE		☐ Change ☐ Addition
NAME			3.2 NA	<b>AME</b>	ŀ	
STREET ADDRESS			3 3 ST	REET A	ADDRESS	
CITY-ST-ZIP			3.4. CI		1-ZIP	
TITE		L_J DELETE	4.1 111			Change Addition
NAME			4. 2 N/		1	
STREET ADDRESS			i i		ADDRESS	
CITY-ST-ZIP		DELETE	4.4 CI		- ZIP	Change Addition
TITLE		☐ bttele	5.1 TI)			C Ollarge C Addition
NAME CTOCCT ADDRESS			5.2 NA		ADDRESS	
STREET ADDRESS			5.4 CIT			
CITY-ST-ZIP		☐ DELETE	6.1 TIT		511	☐ Change ☐ Addition
NAME		<del></del>	6.2 NA			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			6.4 CI			
44 I hereby	certify that the information supplied w	th this filing does not qualify	for the exe	empti	ion stated	d 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.						