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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P97000095905** (0)

MOLL ENTERPRISES, INC.

FILED Apr 24 1998 8:00am Secretary of State



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DO NOT WRITE IN THIS SPACE 3. Data Incorporated or Camillad 11/10/1997 2. Principal Pioce of Business 3. Principal Pioce o	Principal Place of Business Mailing Address						
3. Data Incorporated or Qualified 1/1/10/1/997							
11/10/1997						SPACE	
22. Main'ny Andreas 3					\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
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Suite, Apt. 4: etc. Stock State Stock State Stock		lace of Business	-				
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SAS ALMERIA AVENUE CORAL GABLES FL 33134	AM						
CORAL GABLES FL 33194 Pursuant to the provisions of Sections 607 0502 and 607 1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Fords, Such change was authorized by the corporation's board of directors. I thereby accept the appointment as registered agent, or both, in the State of Fords Such change was authorized by the corporation's board of directors. I thereby accept the appointment as registered agent, or both, in the State of Fords Statutes. Signature may be added to the purpose of changing its registered agent, or both, in the State of Fords Statutes. Signature may be added to the purpose of change in the purpose of change in the purpose of change in the purpose of change is registered agent, or both, in the State of Fords Statutes. Signature registered agent of directors. I thereby accept the appointment as registered agent, or both, in the State of Fords Statutes. Signature registered agent of directors. I thereby accept the appointment as registered agent, or both, in the State of Fords Statutes. Signature registered agent, or both, in the State of Fords Statutes. Signature registered agent, or both, in the State of Fords Statutes. Signature registered agent, or both, in the State of Fords Statutes. Signature registered agent, or both in the purpose of change is registered agent, or both in the purpose of change is registered agent, or both in the purpose of change is registered agent, or both in the purpose of change is registered agent, or both in the purpose of change is registered agent, or both in the purpose of change is registered agent, or both in the purpose of change is registered agent, or both in the purpose of change is registered agent, or both in the purpose of change is registered agent, or both in the purpose of change is registered agent, or both in the purpose of change is registered agent, or both in the purpose of change is registered agent, or both in the purpose of change is reg	343 ALMERIA AVENUE						
11. Pursuant to the provisions of Sociens 607 0502 and 607 1508, Florida Statutes, the above-name of 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 corporations submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporations board of directors. I hereby accept the appointment as registered agent, tem (analysis) and the population of the property accept the appointment as registered agent, tem (analysis) and the population of the purpose of changing its registered agent, and active the property of the purpose of changing its registered agent, and active the property of the purpose of changing its registered agent, and active the property of the purpose of changing its registered agent, and active the property of the purpose of changing its registered agent, and active the property of the purpose of changing its registered agent, and active the property of the purpose of changing its registered agent, and active the property of the purpose of changing its registered agent, and of directors. I hereby accept the purpose of changing its registered agent, and of directors. I hereby accept the purpose of directors. I hereby accept the purpose of directors. I hereby accept the appointment as registered agent, and active the purpose of directors. I hereby accept the purpo				82 Street Ad	Street Address (P.O. Box Number is Not Acceptable)		
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11. Pursuant to the provisions of Socions 607 (500) and 607 (1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am (arbitation) in the state of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent are registered of the corporation's board of directors. I hereby accept the appointment as registered of socions (arbitation) and adopt the obligations of, Section 607 (505, Florida Statutes). SIGNATURE SIGNATURE SUPPLIANCE OF FIGH AND DIFFECTORS OF FIGH S AND DIFFECTORS OFFICERS AND DIFFECTORS TITLE OFFICERS AND DIFFECTORS OFFICERS AND DIFFECTORS OFFICERS AND DIFFECTORS 13. RADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12 12. NAME 13. STREET ADDRESS OFFICERS AND DIFFECTORS IN 12 14. IT				84 City Ng	EW SMYRNA BEAGH FL	85 Zip Code 9	
SIGNATURE	11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	the above-named co	progration submits this statement for the nurpose of	changing its registered. I	
SIGNATURE	office or r	egistered agent, or both, in the Sta m familiar with, and ac f ect the obli	te of Florida. Such change was au nations of, Section 607,0505. Flori	thorized by the corpor da Statules	ration's board of directors. I hereby accept the app	ointment as registered	
PSTD		Vial Med Ke	MILL) PETD	ca biaidios.	4-17-9	T A	
TITLE	SIGNATURE			Registered Agent signature req			
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NEW SMYRNA FL 32169	NAME			1.2 NAME			
TITLE	STREET ADDRESS			1.3 STREET ADDRESS			
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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 suppliemental 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 an an attachment with an address.

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YIND (YEUN) L. MOLL

PSTD

4-17-98

904-426-2220