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 # P97000096005 (8)

SHUBITZ & ROSENBLOOM CONSULTANTS, P.A.

Principal Place of Business Mailing Address 11428 SW 109TH ROAD 11428 SW 109TH ROAD MIAMI FL 33176 **MIAMI FL 33176** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/10/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable 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 23 28 Trust Fund Contribution Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible ☐ No 24 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name KADE, PAUL M 9300 SOUTH DADELAND BLVD Street Address (P.O. Box Number is Not Acceptable) **DADELAND TOWERS NORTH SUITE 408** 83 MIAMI FL 33156-2719 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change TITLE 1.1 TITLE ROSENBLOOM, HOWARD NAME 1.2 NAME 7901 SW 147 COURT STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33193 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE DST 2.1 TITLE SHUBITZ, LEONARD ALAN 2.2 NAME 7303 SW 144 AVENUE 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33183** 2. 4 CITY - ST - ZIP CITY-ST-ZIP TITLE DELETE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition

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 chapter, or on an attachment with an address.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY - ST - ZIP

TITLE

NAME

DELETE

Change

Addition

FILED

Mar 30 1998 8:00am

Secretary of State