## 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 # P9700097874 (6)

LAW OFFICES OF GARY I. ROSENBERG, P.A,

Principal Place of Business Mailing Address 2800 BISCAYNE BLVD. 2800 BISCAYNE BLVD. 9TH FLOOR 9TH FLOOR DO NOT WRITE IN THIS SPACE MIAMI FL 33137 MIAMI FL 33137 3. Date Incorporated or Qualified 11/17/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 65-0716973 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country Ζıp 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. X Yes 25 30 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROSENBERG, GARY I ESQ. 2800 BISCAYNE BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) 9TH FLOOR 83 **MIAMI FL 33137** City 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, typod or printed name of registered agent and title if applicable (NOTF: Registored Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE Change Addition ROSENBERG, GARY I ESQ. NAME 1.2 NAME 2800 BISCAYNE BLVD. STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33137** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE Change Addition 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2.4 CITY+ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE Change ■ Addition 6.1 TITLE 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 go on an attachment with an address.

Posses 4/4/00

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R2E034 (10/97)

**FILED** 

May 04 1998 8:00am

Secretary of State