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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandre B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name P97000100946 (7)

ncipal Place of Business	Mailing Address
848 BRICKELL AVENUE SUITE 1120	ONE GREENWAY PLAZA SUITE 850
MIAMI FL 33131	HOUSTON TX 77048-0102

FILED Apr 15 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/01/1997 4. FEI Number Applied For 65-0798252 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Zip Country ^Z 33131-2943 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 30 29 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 Name FRIEDMAN, DAVID A 848 BRICKELL AVENUE SUITE 1120 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33131** 83 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 CR2E034 (10/97 OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE X Change Addition TITLE 1.1 TITLE FRIEDMAN, LEONARD E NAME 1.2 NAME 848 BRICKELL AVENUE SUITE 1120 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33131** CITY-ST-ZIP 1.4 CITY-ST-ZIP **Addition** TITLE DELETE 2.1 TITLE Change Friedman, David A. NAME 2.2 NAME 848 Brickell Ave., Suite 1120 STREET ADDRESS 2.3 STREET ADDRESS Miami, FL 33131-2943 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change X Addition TITLE 3.1 TITLE Ray, Sandra E. 3.2 NAME NAME One Greenway Plaza, Suite 850 3.3 STREET ADDRESS STREET ADDRESS Houston, TX 77046-0102 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE Swinke, David L. 4. 2 NAME NAME One Greenway Plaza, Suite 850 Houston, TX 77046-0102 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5 1 TITLE TITLE NAME 5.2 NAME **5.3 STREET ADDRESS** STREET ADORESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME **6.3 STREET ADDRESS** STREET ADDRESS

14. Thereby 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 expect 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

SIGNATURE: Sandra E. Ray, Corp. Sec.

CITY - ST - ZIP

02-12-98

713-850-1850