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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State



APPROVED AND FILED

1998 MAR 12 FH 1: 28

1998

DIVISION OF CORPORATIONS

DOCUMENT # P97000101340 (2) DECEMBER PROJECT I CORP.				TALLAHASSEE, FLORE	
Principal Place	of Business	Mailing Address		d toothade the shift short aget bollt abilit state brites t	
7695 S.W. 104TH ST., STE. 210 7695 S.W. 104TH ST., ST MIAMI FL 33156 MIAMI FL 33156			STE. 210		
				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				12/02/1997	_
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional 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	Country	8. This corporation owes or has paid the curren	nt year Intangible
24	25	29	30		Yes No
1.075	9. Name and Address of Cur	rent Registered Agent	B1 Name	10. Name and Address of New Registered Ag	ent
	iman, eric p 15 s. w. 104th st., ste. 210				
- MIAMI FL 33156			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	mm 1 C 00 100		83		
			84 City		85 Zip Code
6			Oity	FL	85 Zip Code
11. Pursuant to office or re agent. I an	o the provisions of Sections 607. egistered agent, or both, in the SI in familiar with, and accept the ob-	0502 and 607.1508, Florida State of Florida. Such change was bligations of, Section 607.0505.	utes, the above-named corps s authorized by the corporal Florida Statutes.	poration submits this statement for the purpose of clion's board of directors. I hereby accept the appoir	hanging its registered ntment as registered
SIGNATURE	,	•			
	Signature, typed or printed name of registered		OTE: Registered Agent signature requir		
12.	DPS	AND DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND D	Change Addition
NAME	LITTMAN, ERIC P	precit	1.2 NAME	7000024567	
STREET ADDRESS	TOOK OW TOUTH OF DIE OTO		1.3 STREET ADDRESS	-03/13/98010)68022
CITY-ST-ZIP	MIAMI FL 33156		1.4 CITY-ST-ZIP	****600.00 *	k***150.00
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	2 4 CITY-ST-ZIP	······································	Change Addition
TITLE NAME		[Dett. if	3.1 TITLE 3.2 NAME	_	T results T Morentees
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. DITY-ST-ZIP		
TITLE		DELETE	4.1 TATLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	<u>L</u>	Change L Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		Λ
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change A Adams
NAME			6.2 NAME	_	MAD PO
STREET ADDRESS			6.3 STREET ADDRESS		~ WIN
CITY-ST-ZIP			6.4 CITY-ST-ZIP		O,
indicated o	on this annual report or suppleme	intal annual report is true and ai eceiver or trustee empowered to ittachment with an address	ccurate and that my signatur c execute this report as requ	Section 119.07(3)(i), Florida Statutes. I further certifre shall have the same legal effect as if made under uired by Chapter 607, Florida Statutes; and that my	r oath; that I am an