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 # P97000107080 (8)

FIREHOUSE IV OF MIAMI, INC.

Principal Place of Business 7650-CORPORATE CENTER DRIVE

Mailing Address

7050 CORPORATE CENTER DRIVE 5TH FLOOR

FILED Jul 29 1998 8:00am Secretary of State



STH-FLOOR-DO NOT WRITE IN THIS SPACE MIAMI FL 83126 MIAMI FL 93126-3. Date Incorporated or Qualified 12/22/1997 2. Principal Place of Business 2a. Mailing Address Applied For 1000 S. MIAMI 1000 S. MIAMI Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be MILAMI (1/1 AM) LORIDA Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intapgible **▼**No VSA Yes 33/30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MIAMI CORPORATE SYSTEMS, INC. 5200 BLUE LAGOON DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 700 83 MIAMI FL 33126 84 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE X Change Addition VIDAURRETA, AUGUSTO L. VIDAURRETA, AUGUSTO L NAME 1.2 NAME 1000 S. Miami Avenue 7650 CORPORATE CENTER DRIVE 5TH FLOOR STREET ADDRESS 1.3 STREET ADDRESS Miami, FL 33130 MIAMI FL 33126 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change X Addition TITLE 2.1 THUE 2.2 NAME RICHARDSON, THOMAS GRAHAM NAME 2.3 STREET ADDRESS 1000 S. Miami Avenue STREET ADDRESS Miami, FL 33130 2.4 CITY-ST-ZIP CHTY-\$T-ZIP DELETE Change Addition 😿 TITLE 3.1 THILF DVPS FERNANDEZ, JOSE AMADOR NAME 3.2 NAME 1000 S. Miami Avenue 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Miami, FL 33130 □ DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHTY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - S1 - ZIP CITY-ST-ZIP DELE1E Addition Change 61 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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 execute 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

(10/97 **CR2E034**