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 # P97000108172 (2)

BENOWITZ MANAGEMENT COMPANY, INC.

FILED Apr 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					/ 166/1641 (16 1811) 196/1 88/11 88/11 88/11 116/1 88/10) (81/6) 181/1 181/1 181/1 181/1
1541 BRICKELL AVE. UNIT A2201 1541 BRICKELL AVE. UNIT			UNIT A2201		
MIAMI FL 331	30	MIAMI FL 33130			DO NOT WRITE IN THIS SPACE
				4.	3. Date Incorporated or Qualified
					12/24/1997
2. Principal P	lace of Business	2a. Mailing Address	4		4. FEI Number Applied For
21	•	26			65-8887521 Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			S8 75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State	в	City & State			Election Campaign Financing \$5.00 May Be
23		28	1		Trust Fund Contribution
Ζιρ	Country	Zıp	\vdash	untry	8. This corporation owes or has paid the current year Intangible
24	[25]	29	30	,	Personal Property Tax due June 30.
	9, Name and Address of Curr	ent Hegistereo Agent		81 Name	10. Name and Address of New Registered Agent
	MIAN, VINCENT E JR			Name	
80 SW 8TH ST, SUITE 2550				82 Stree	et Address (P.O. Box Number is Not Acceptable)
MLF	MI FL 33130			83	······································
				84 City	■■ 85 Zip Code
44 Parguant	to Nho provisions of Spations 607 Of	02 and 607 1500 Florida Sta	tuton the e	haus 2022	FL of the control of
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 familia with, and accept the obligations of Section 607.0505, Florida Statutes.					
SIONATURE 2-6-10					
12.	Signature, typed or printed name of registered a	gent and title if applicable (N ND DIRECTORS	IOTE: Replistere	d Agent signatu	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	111	III£	Change Addition
NAME	BENOTIZE, H ALLEN		12 N		77
STREET ADDRESS	1541 BRICKELL AVE, UNIT	A2201	`	TREET ADDRESS	s BENOWITZ, H. ALLEN
CITY-ST-ZIP	MIAMI FL 33129			ITY-ST-ZIP	
TITLE		☐ DELETE	2.1 T		Change Addition
NAME			22 N	AME	
STREET ADDRESS			2.3 S	TREET ADDRESS	s
CITY-ST-ZIP			2.40	CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 T	ITLE	☐ Change ☐ Addition
NAME			3.2 N	AME	
STREET ADDRESS			338	treet address	s
City-St-ZiP		· · · · · · · · · · · · · · · · · · ·	3.4. (CITY+ST-ZIP	
TITLE		☐ DELETE	4.1 T		Change Addition
NAME			4	NAME	
STREET ADDRESS			4.3 S	TREET ADDRESS	s
CITY-ST-ZIP		T briese		ITY-ST-ZIP	The same
TITLE		☐ DELETE	5.1 T		Change Addition
NAME			5.2 N		
STREET ADDRESS				TREET ADDRESS	s
CITY-ST-ZIP		DELETE		ITY-ST-ZIP	Change Laddit-
HILE		LJ DECETE	617		☐ Change ☐ Addition
NAME ATALET LIBERTON			6.2 N		
STREET ADDRESS				TREET ADDRESS	s
CITY-ST-ZIP			6.4 C	ITY-ST-ZIP	

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.