NOW: FILING FEE AFTER MAY 1ST IS \$550.00 FILED FLORIDA DEPARTMENT OF STATE 29 JAN 19 PM 1:46 Sandra B. Mortham Secretary of State SECTION OF STATE TALLALIANSSEE, FLORIDA DIVISION OF CORPORATIONS P97-000108487 DOCUMENT # LIGHTERS UP, Inc. Principal Place of Business Mailing Address DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/29 2a. Mailing Address 2. Principal Place of Business Applied For 1790 Wast 49Th51 27 1790 Wast 49Th ST Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. 58.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be City & State 6. Election Campaign Financing Vr. HIVEPH 10121DF Trust Fund Contribution Added to Fees 33012 Country Country 8. This corporation owes or has paid the current year Intangible 33012 USA Yes 25 29 30 Personal Property Tax due June 30. □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Riós 81 82 83 HALLANDALE FL-23009 84 3812 FL 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corre submits this statement for the purpose of changing its registered and directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Such change was authorized by trecord agent. I am familiar with, and aggest the obligations of, Section 607.0505, Florida Statutes.

NATURE

Signature, typed or girted name of registered agent and little II applicable. (NOTE: Registed Agent signature) SIGNATURE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DIRECTOR DELETE 1.1 TITLE Change Addition DOUGLAS PHICAN NAME 1.2 NAME NIL 19325 NW 67 COUNT #P STREET ADDRESS 1.3 STREET ADDRESS 300002752053---01/22/99-01104-018 DIRECTOR RINCON -2 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE ****150.00 CARREL SEL COMON NAME 2.2 NAME NA 4325 NW 67 CONT #P. NA 415MI FE 33015 STREET ADDRESS 300002752053 2.3 STREET ADDRESS -01/22/99--01104--019 2. 4 CITY-ST-ZIP CITY-ST-ZIP FE VAJBUENA ****150.00 【****6151[] 图3::::: TITLE 3.1 TITLE NAME 3.2 NAME NIS 17325 NW 67 CONTYP. STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4, CITY-ST-ZIP TITLE Aggition 4.1 TITLE Change NAME 4. 2 NAME 17325 NW 67 CONTER STREET ADDRESS 4.3 STREET ADDRESS MINN; FL 33015 SC, 21-99 Change Addition CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE 5.1 TITLE NAME 52 NAME STREET ADORESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change TITLE 6.1 TITLE Audition NAME 5.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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 it made under oath; that I am an officer or director of the corporation of 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 it changed, of on an attachment with an address.

STREET ADDRESS

CITY-ST-ZIP



Lighters ILP, Inc.

Miami, November 11th 1998

Division of Corporations Annual Report Section

Dear Sir/Madam::

Regarding with the annual report for 1998 of Lighter ILP, Inc. Document mimber P97000108487, there are two reason for wich we did not file such document. First, we were out of the United States, an also we moved our mailing adddress to 1790 West 49th Street Suite # 400-4, Hialeah FL 33012.

Due for these reasons, we are sending US \$ 155.00 for the annual reportm 1998.

We appreciate in advance your understanding.

Couglas Rincon

Sincerely

Treasurer & Secretary