FILED

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FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P98000036904
4 Ocean office Manage	

<ol> <li>Corporation</li> </ol>	n Name				1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	
APRIL PROJECT IV CORP.				LEGISLAND TON STATE		
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Principal Place	e of Business	Mailing Address			) INDEREST TOU THEM ENDES MUSES MUSICE WHILE MUSI	90 19990 02590 18991 00593 0101 1001
	TH ST. STE. 210	7695 S.W. 104TH ST. STE.	210			
MIAMI FL 3315		MIAMI FL 33156				
					DO NOT WRITE IN THI	S SPACE
					3. Date Incorporated or Qualifed	
					04/23/1998	
2. Principal P	lace 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
22		City & State				Fee Required
City & Stat	e	}- <sub>1</sub>			6. Election Campaign Emancing	\$5.00 May Be
<b>23</b> Zip	Country	28 Zip	Country		Trust Fund Contribution	Added to Fees
	Country	The second second	1 ,		8. This corporation owes the current year in	ntangible []Yes []No
24	25 9. Name and Address of Curren		[0]		Personal Property Tax  10. Name and Address of New Registered	
	a, Haine and Address of Currer	K Registered Agent	81	Name	To. Italie and Address of New Registerer	AMent
LITT	MAN, ERIC P					
	5 S.W. 104TH ST. STE. 210		82	Street Add	dress (P.O. Box Number is Not Acceptable)	
MIAJ	MI FL 33156		83	-	••	
			84	City	<b>F</b>	85 Zip Code
	TO A TOTAL CONTROL TO BE SEEN AND A SEE	0 114 002 4500 Fully 041 441			Γ	<u> </u>
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State	of Florida Such change was aut	, the above horized by	e rianied cor the corporat	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	ointnient as registered
agent. La	m familiar with, and accept the obliga	tions of Section 607.0505, Florid	la Statutes			
SIGNATURE	=== ,===, ==== ,==, ===== ,==	and the state of t			re-Lwho by-estable-ji (2/ATE	
12.	Signature, typed or proted name of registered age:	ID DIRECTORS	E 13.	il Segi afato te quit	reliens resistancy BATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	DP CONTROL NO AN	[] DELETE	11 TITLE		ADDITIONS/GIVANOES TO OF TOLING	[   Change       Addition
NAME	LITTMAN, ERIC P	V	1.2 NAME			( ) - · · · · · · · · · · · · · · · · · ·
STREET ADDRESS	7695 S.W. 104TH ST. STE. 2	10	1	LADDRESS		
	MIAMI FL 33156	.0	ł	1		
CITY-ST-ZIP TITLE		[] DELETE	14 City S 21 Titus	i - Kib.		[]Change []Addition
NAME	}	the section	2 7 MANE	}		F 1 2 - F 1 - 120 404
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TITLE		E. Detere	32 NAME		4000028 <b>1</b> 5 -03/23/99 <sub>70</sub>	01083004
NAME	1			LANGERO		****150.00
STREET ADDRESS			•	LADORESS	4441 QQQ 100	
CITY-ST-ZIP		34 CHY-51-ZiF			[ ] Change [ ] Addition	
TITLE	]	L'1 pert it	4 1 TITLE			Lil Quantity Lil Maderal
NAME			4 2 NAME			
STREET ADDRESS	1		ſ	ADDRESS		
CITY-ST-ZIP		[   DELETE	4.4 CITY - S	1-ZIF	***	F1Change F1Addition
TITLE	1	L I DELECTE	■ 51 HHLF	1		T CONSTIGE     AUGUIOT

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). I lorida 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 oalth; 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, with all other like empowered.

5 2 NAME

61TiTL€ 62 NAVE

[ ] DELETE

5.3 STREET ADDRESS

63 STREET ADORESS

6.4 City-ST-761

54 C(TY-\$1-7)P

**SIGNATURE:** 

NAME

NAME

STREET ADDRESS

STREET ADDRESS

City-\$t-zip TITLE

ERIC P. LITTMAN 2/26/99