FILED Apr 26, 1999 8:00 am Secretary of State 04-26-1999 90112 004 ***150.00

305-992.3725

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

1. Corporation EQUITY I	Builders in	IC.	Ma	ailing Address			_				
8920 S.W. 69TH Miami FL 36173				O. BOX 520481 AMI FL 33152				DO NOT WR	ITE IN TH	S SPACE	
							i	corporated or Qualifed 8/1998			
	ce of Business	٠١	<u> </u>	Mailing Address			4. FEI No				p jed For
12167		<u> </u>	26	Suite, Apt, #, etc.				<u>- 0847728</u>		\$8.75 A	t Applicable
Suite, Apt. #	, etc.		27	Stite, Apr. #, etc.			5. Certifo	ate of Status Desired		Fee Re	
City & State		£.1		-City & State -			1	n Campaign Financing		\$5.00	
	e Pines	4.1	28	7:-	<u>Co.</u>	intr.		und Contribution		Added t	o Fees
7 4 330	ر اعدا	Onuta Openity	29	Zip	30	intry	l l	erporation owes the cur ral Property Tax.	reni year i	Tangible \	} s v₀ _
1 137	[23]	Address of Currer		tered Agent	1301			and Address of New	Registere	i Agent	
	05000					81 Name					
	a, pedro S.W. 69th St.					82 Street A	d tress (P.O. Box	Number is Not Accept	able)	···	
	3.17. 03111 31. IJ FL 33173	•				19	WZ FOIL	111187			
17117 444											
						84 City			-	, 85 Zip C	()25
						land cut f	inpuske !	r'uses	F	<u>_ </u>	ا جين
1. Pursuant to	o the provisions o	f Sections 607.050	2 and 6	07.1508, Florida Sta	atures, the a	Tour samed	o maration cubm	its this statement for the	DUMOSE (d changing its	registered
office o re agent. I an	mieterad spant Ar	atet2 ant at ctant	o Florid	07.1508, Florida State. da. Such change wa , Section 607.0505,	is suinonzeo	bove-named of	o maration cubm	ts this statement for the directors. I hereby acce	DUMOSE (d changing its	registered
office o' re agent. I am IGNATUR E	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	Section 607.0505,	Fic rida Stat	bove-named of d by the corporates.	co poration submi ration's board of qu'ed when reinstating	ts this statement for the directors. I hereby acce	purpose option the app	of changing its printment as rec	n:gistered ji;tered
office o' repagent. I am	gistered agent, or n familiar with, an	r both, in the State diaccept the obliga	o Florid itik ins of,	da. Such change wa , Section 607.0505, d applicable. (N	Ficrida Stat OTC: Registered 13.	bove-named of by the corporates.	co poration submination's board of a submination's board of a submination of the subminat	ts this statement for the directors. I hereby acce	purpose option the app	of changing its pintment as req ND DIRECTO	nigistered pi itered
office o' repagn. I am	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	Section 607.0505,	Ficrida Stat OTC: Registered 13.	bove-named of by the corporates. Agent signature re-	co poration submination's board of a submination's board of a submination	is this statement for the directors. I hereby acce	purpose option the app	of changing its printment as rec	n:gistered ji;tered
office o' repagent. I am	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	da. Such change wa , Section 607.0505, d applicable. (N	Ficrida Stat OTI: Registered 13. 1.1 TH	bove-named of by the corporates. Agent signature remains	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose option the app	of changing its pintment as req ND DIRECTO	nigistered pi itered
office o' repagent. I am IGNATUR E 3 2. THE TREET ADDRE! S	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	da. Such change wa , Section 607.0505, d applicable. (N	Ficrida Stat OTT: Requisered 13. 1.1 Ti 1.2 Ni 1.3 S	bove-named of by the corporates. Agent signature re-	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose option the app	of changing its continuent as required to the change of the change	rigistered pi stered RS IN 12
office o' repagent. I am siGNATUR E ST. 2. The NAME TREET ADDRE! STY-ST-ZP	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	da. Such change wa , Section 607.0505, d applicable. (N	S a uthorized Ficinda Stati NOTE: Registered 13. 1.1 TI 1.2 No 1.3 ST	bove-named of doy-named of doy-named of doy-named of doy-name of the supranue	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	of changing its continuent as required to the change of the change	nigistered pi itered
office o 're- agent. I am agen	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	a. Such change wa Section 607.0505, 4 applicatio. (N CTORS	S a uthorized Ficinda Stati NTT: Registered 13. 1.1 TI 1.2 NI 1.3 S	Dove-named of d by the corporates. If Agent signature to the corporates and the corporat	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	of changing its intrment as required in the control of the change in the	rigistered pi stered RS IN 12
office o 'rer agent. I am PIGNATUR E 2. THE NAME TY-ST-ZIP THE NAME	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	a. Such change wa Section 607.0505, 4 applicatio. (N CTORS	13. 1.171 1.2 No. 1.3 State 1.4 Ct. 1.7 T. 1.2 No. 1.2 T.	Dove-named of d by the corporates. If Agent signature to the corporates and the corporat	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	of changing its intrment as required in the control of the change in the	rigistered pi stered RS IN 12
office o 're- agent. I am ilGNATUR = 2. The write in the interval of the in	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	a. Such change wa Section 607.0505. # applicable (N	13. 1.1 Ti 1.2 Ni 1.3 S 1.4 Ci 2.1 Ti 2.2 Ni 2.3 S 2.4 Ci 2.4 Ci	DOVE-Named of dry the corporates. If Agent signature to the corporates the corporate the corporates the corpor	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	ND DIRECTO Change Change	registered pi stered RS IN 12 Addition
office o 're- agent. I am agent. I am iliGNATUR E 2. TLE NAME RREET ADORE! S TY-ST-ZIP TLE NAME RREET ADORES S TY-ST-ZIP TLE NAME	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	a. Such change wa Section 607.0505, 4 applicatio. (N CTORS	13. 1.1 Ti 1.2 Ni 1.3 S 1.4 Ci 2.1 Ti 2.2 Ni 2.3 S 2.4 Ci 3.1 Ti	DOVE-named of dry the corporates. I Agent signature to the corporate to t	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	of changing its intrment as required in the control of the change in the	rigistered pi stered RS IN 12
office o 're- agent. I am agent. I am iliGNATUR E 2. THE NAME REET ADORE! S TY-ST-ZIP THE NAME REET ADORE! S TY:ST-ZIP THE NAME	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	a. Such change wa Section 607.0505. # applicable (N	13. 1.1 Ti 1.2 Ni 1.3 S 1.4 Ci 2.1 Ti 2.2 Ni 2.3 S 2.4 Ci 3.1 Ti 3.2 Ni	DOVE-named of dry the corporates. I Agent signature to the corporate to t	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	ND DIRECTO Change Change	registered pi stered RS IN 12 Addition
office o 're- agent. I am ilGNATUR E 2. TLE WE REET ADORE! S TY-ST-ZIP LE WE REET ADORES S TY-ST-ZIP LE WE REET ADORES S TY-ST-ZIP	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	a. Such change wa Section 607.0505. # applicable (N	13. 1.1 Ti 1.2 Ni 1.3 S 1.4 Ci 2.1 Ti 2.2 Ni 2.3 S 2.4 Ci 3.1 Ti 3.2 Ni 3.3 S	Indeed and the control of the contro	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	ND DIRECTO Change Change	registered pi stered RS IN 12 Addition
office o 're' agent. I ar' agent. I ar' agent. I ar' signatur = 2. TLE AME TREET ADORE! S TTY-ST-ZIP TLE AME TREET ADORE! S TY-ST-ZIP TLE AME TREET ADORE! S TY-ST-ZIP TY-ST-ZIP	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	a. Such change wa Section 607.0505. # applicable (N	13. 1.1 Ti 12.N 13. 1.1 Ti 12.N 13. 2.1 Ti 22.N 2.3 S 2.4 C 3.1 Ti 32.N 33.S 3.4.C	DOVE-NAME OF DOVE STATE OF THE STATE OF	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	ND DIRECTO Change Change	registered pi stered RS IN 12 Addition
office o 're' agent. I ar' agen	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	a. Such change wa. Section 607.0505. # applicable (N	13. 1.1 Ti 12.N 13. 1.1 Ti 12.N 13. 2.1 Ti 22.N 2.3 S 2.4 C 3.1 Ti 32.N 33.S 3.4.C	DOVE-named of d by the corporates. I Agent signature to the corporate to	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	ND DIRECTO Change Change	registered ji stered RS IN 12 Addition Addition
office o 're agent. I am ingnature : s 2. The second in	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	a. Such change wa. Section 607.0505. # applicable (N	13. 1.1 Ti 1.2 Ni 1.3 S 1.4 Ci 2.1 Ti 2.2 Ni 2.3 S 2.4 Ci 3.1 Ti 3.2 Ni 3.3 S 3.4 Ci 4.1 Ti 4.2 Ni 4	DOVE-named of d by the corporates. I Agent signature to the corporate to	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	ND DIRECTO Change Change	registered ji stered RS IN 12 Addition Addition
Office O ' fer agent. I am in ingnature : \$2. LE MAE REET ADORE! S IY-ST. ZIP LE MAE REET ADORES S IY-ST. ZIP RE MAE REET ADORES S IY-ST. ZIP RE MAE REET ADORES S IY-ST. ZIP	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	AS SUCH CHANGE WAS SECTION 607.0505. # applicable (N) CTORS DELETE DELETE	13. 1.1 Ti 1.2 Ni 1.3 S 1.4 Ci 2.1 Ti 2.2 Ni 2.3 S 2.4 Ci 3.1 Ti 3.2 Ni 3.3 S 3.4 Ci 4.1 Ti 4.2 Ni 4.3 SI 4.4 Ci 4	DOVE-NAME OF OUR DOVE OF THE COMPONING O	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	In thanging its intrment as regarders. IND DIRECTO Change Change Change Change	RS IN 12 Addition Addition
Office O : 100 AGNATUR E S Z. LE ME REET ADORE! S TY-ST-ZIP LE ME REET ADORES S TY-ST-ZIP LE	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	a. Such change wa. Section 607.0505. # applicable (N	13. 1.1 Ti 1.2 Ni 1.3 S 1.4 Ci 2.1 Ti 2.2 Ni 2.3 S 2.4 Ci 3.1 Ti 3.2 Ni 3.3 S 3.4 Ci 4.4 Ci 4.4 Ci 5.1 Ti 4.5 Ci 5.1 Ti 5.1 Ti 5.1 Ti 5.2 Ti 5.3 Ti 6.3 Ti 6.4 Ti 6.5 Ti 7.5 Ti 7	DOVE-named of d by the corporates. I Agent signature to the corporate to	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	ND DIRECTO Change Change	registered ji stered RS IN 12 Addition Addition
Office O : 16th agent. I am ag	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	AS SUCH CHANGE WAS SECTION 607.0505. # applicable (N) CTORS DELETE DELETE	13. 1.1 Ti 1.2 Ni 1.3 S 1.4 Ci 2.1 Ti 2.2 Ni 2.3 S 2.4 Ci 3.1 Ti 3.2 Ni 3.3 S 3.4 Ci 4.4 Ci 4.1 Ti 4.2 Ni 4.3 Si 4.4 Ci 5.1 Ti 5.2 Ni 5	DOVE-named of d by the corporates. I Agent signature to the corporate to	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	In thanging its intrment as regarders. IND DIRECTO Change Change Change Change	RS IN 12 Addition Addition
Office O 1 for agent. I am age	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	AS SUCH CHANGE WAS SECTION 607.0505. # applicable (N) CTORS DELETE DELETE	13. 1.1 Ti 1.2 Ni 1.3 S 1.4 Ci 2.1 Ti 2.2 Ni 2.3 S 2.4 Ci 3.1 Ti 3.2 Ni 3.3 S 3.4 Ci 4.4 Ci 4.5 Ti 4.5 Ni 4.5 Ni 4.5 Ni 5.5 Ni 5	DOVE-named of d by the corporates. I Agent signature to the corporate to	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	In thanging its intrment as regarders. IND DIRECTO Change Change Change Change	RS IN 12 Addition Addition
Office O : Term agent. I am ag	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	AS SUCH CHANGE WAS SECTION 607.0505. # applicable (N) CTORS DELETE DELETE	13. 1.1 Ti 1.2 Ni 1.3 S 1.4 Ci 2.1 Ti 2.2 Ni 2.3 S 2.4 Ci 3.1 Ti 3.2 Ni 3.3 S 3.4 Ci 4.1 Ti 4.2 Ni 4.3 Si 4.4 Ci 5.1 Ti 5.2 Ni 5.3 Si 5.4 Ci 5.4 Ci	DOVE-NAME OF DOVE OF THE CONTROL OF	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	In thanging its intrment as regarders. IND DIRECTO Change Change Change Change	RS IN 12 Addition Addition
Office O : Term agent. I am agent ag	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	DELETE	13. 1.1 Ti 1.2 Ni 1.3 S 1.4 Ci 2.1 Ti 2.2 Ni 2.3 S 2.4 Ci 3.1 Ti 3.2 Ni 3.3 S 3.4 Ci 4.1 Ti 4.2 Ni 4.3 Si 4.4 Ci 5.1 Ti 5.2 Ni 5.3 Si 5.4 Ci 5.4 Ci	DOVE-NAME OF DOVE OF THE CONTROL OF	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	of changing its intrment as required to the control of the control of the change	RS IN 12 Addition Addition
office o' re agent. I am SIGNATUR E	gistered agent, or n familiar with, an	r both, in the State diac cept the obliga oner a of registered age	o Florid itik ins of,	DELETE	13. 1.1Ti 1.2 Ni 1.3 S 1.4 Ci 2.1 Ti 2.2 Ni 2.3 S 2.4 Ci 3.1 Ti 3.2 Ni 3.3 S 3.4 Ci 4.1 Ti 4.2 Ni 4.3 Si 4.4 Ci 5.1 Ti 5.2 Ni 5.3 Si 5.4 Ci 6.2 Ni 6.2 Ni	DOVE-NAME OF DOVE OF THE CONTROL OF	operation submination's board of a submination's board of a submination of	is this statement for the directors. I hereby acce	purpose of the app	of changing its intrment as required to the control of the control of the change	RS IN 12 Addition Addition