1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P98000076227**1. Corporation Name

AUGUS	RESOURCES III, INC.	0 , 0				
Principal Place of Business Mailing Address					1 IBOLIBEL LIN INIBIN DEUL BRELL BELLI BERL	I INSID DYLIN IYNYN DINLY ENDY GON
7695 S.W. 104TH STREET SUITE 210 7695 S.W. 104TH STREET MIAMI FL 33156 MIAMI FL 33156			SUITE 210			
					DO NOT WRITE IN THIS	SISPACE
					3. Date Incorporated or Qualified	
9 D	W-1-2(D)	2a Mailing Address			09/01/1998 4. FET Numitier	
					4, FEINumber	Applied For Not Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 Additional
22 27					5. Certificate of Status Desired []	Fee Required
City & State City & Stale					6. Election Campaign Financing	\$5.00 May Be
28					Trust Fund Contribution	
Zip	Country	Ζφ	Country		8. This corporation owes the current year In	tangible
24 25 29 3					Personal Property Tax [] Yes [] No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent
1111	MAN, ERIC P		81	Name		
7695 S.W. 104TH STREET SUITE 210 MIAMI FL 33156				Street Add	Address (P.O. Box Number is Not Acceptable)	
-			83			
			[84]	City	<u>.</u>	85 Zip Code
office or r agent I a SIGNATURE 12.	egistered agent, or both, in the State on familiar with, and accept the obligation of the state	f Florida Such change was autons of, Section 607 0505, Floridad the Italyana and I	horized by da Statutes.	the corporati	condition submits this statement for the purpose of on's board of directors. I hereby accept the appointment of the purpose o	intment as registered
TITLE	SPD [I DELETE		1110LE	1		[Change [Addition
NAME	LITTMAN, ERIC P		1.2 NAME			
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CITY-ST-ZIP	MIAMI FL 33156		14 CiTY-S"	.269		
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NAME			2.2 NAME			
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CITY-ST-ZIP			2 4 CITY-ST	·200		
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NAME			3.2 NAME		-03/23/990	01083001
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NAME			4 2 NAME			
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NAME		CIDECCIE	5 2 NAME			(Love ide El Modificial
STREET ADDRESS			53 STREET	ADDRESS		
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TITLE .		[DELETE	€ 1 TITLE			[]Change 148 day
NAME			6.2 NAME	[16.77
STREET ADDRESS			63STREET.	ADDRESS		'A'
- 1				1		· ·

14. Thereby certify that the information supplied with this filling 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 justee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ERIC P. LITTMAN TURE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

99 1149 23 111 3: 58