FILE NOW: FILING FEE A PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DI Sand Sec	EPARTMEN'I OF STATE TA B. Mortham Cretary of State OF CORPORATIONS	FILED Jul 10 1998 8:00am Secretary of State	
	MENT # S2389 In Name ERVICES, INC.	90 (4)	•		
Principal Place of Business 8252 NW 68 STREET MIAMI FL 33166 US		Mailing Address 8252 NW 68 STREET MIAMI FL 33166 US			
00		03		3. Date Incorporated or Qualified 01/09/1991	
Principal Place of Husiness		2a. Maihrig Address		4. FEI Number	Applied For
Suite, Apt.	#, etc.	26 Suite, Apt. #, etc		65-0247330	Not Applicab \$8.75 Additional
City & State		27] City & State		5. Certificate of Status Desired       \$0.75 Additional Fee Required         6. Election Campaign Financing       \$5.00 May Be	
7:-		28		Trust Fund Contribution	Added to Fees
Zip	Country 25	Zip 29	Country 30	<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	
	9. Name and Address of Cur VIN, HOLLY E	rent Registered Agent		10. Name and Address of New Regist	tered Agent
589 Mla	90 <b>\$</b> W 102 STREET AMI FL 33156	1502 and 607, 1508. Florida S	83 84 City	dress (P.O. Box Number is Not Acceptable)	FL 85 Zip Code
<ul> <li>Pursuant I office or re agent. 1 ar</li> <li>GNATURI</li> </ul>	90 \$W 102 STREET AMI FL 33156 Ito the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob		83 84 City tatutes, the above-named co was authorized by the corpor- 5, Florida Statutes.	rporation submits this statement for the purp ation's board of directors. I hereby accept th	
589 MIA office or to agent. 1 ar GNATURL	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob		83 84 City	rporation submits this statement for the purp ation's board of directors. I hereby accept th	Dec of changing its registered
589 MIA office or re agent. 1 ar GNATURE L	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob Signature, typed or pentiet more of rejected OFFICE RS /	agent and the r <sup>1</sup> applicable	83     84     City     itatutes, the above-named co was authorized by the corpor. 5, Florida Statutes.     (NOTE Registered Agenit's gnature reg     13.     1.1 TILE	rporation submits this statement for the purp ation's board of directors. I hereby accept th	S AND DIRECTORS IN 12
589 MIA office or re agent. 1 ar GNATURL LE ME	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob- Structure, speed or pentiet name of resistore ( OFFICE RS / DP LEVIN, HOLLY E \$890 SW 102 ST	agent æst iste if applicatile AND DIRE CTORS	83 84 City tatutes, the above-named co was authorized by the corpor. 5, Florida Statutes. (NOTE Begistered Agenit's gnature req 13.	rporation submits this statement for the purp ation's board of directors. I hereby accept th	S AND DIRECTORS IN 12
589 MIA office or re agent. 1 ar GNATURE. LE ME KET ADDRESS Y-ST-ZIP	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agont, or both, in the St im familiar with, and accept the ob Stratter, typed or pentist name of residence 1 OFFICE RS / DP LEVIN, HOLLY E \$890 SW 102 ST MIAMI FL	egent arctiese d'applicable AND DIRE CTORS	83     84     City     tatutes, the above-named co was authorized by the corpor- 5, Florida Statutes.     1001E Registered Agent signature reg     13.     1.1 TILE     1.2 NAME     1.3 STREELADDRESS     1.4 CITY-ST-2IP	rporation submits this statement for the purp ation's board of directors. I hereby accept th	Changing its registere e appointment as registered     Atte     S AND DIRECTORS IN 12     Change Addition
589 MLA Office or re agent. 1 ar GNATURE.	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob- Structure, wind or pentiet have of residence 1 OFFICERS / DP LEVIN, HOLLY E 5890 SW 102 ST MIAMI FL DV LEVIN, ALEXANDRA M	agent æst iste if applicatile AND DIRE CTORS	83       84       City       Itatutes, the above-named covas authorized by the corpor.       5, Florida Statutes.       Itatutes, the above ramed covast authorized by the corpor.       10016     Registered Agent's gnature req.       13,       11,111LE       12,NAME       1.3 SINEL ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME	rporation submits this statement for the purp ation's board of directors. I hereby accept th	Changing its registere e appointment as registered     Atte     S AND DIRECTORS IN 12     Change Addition
589 MLA Pursuant I office or re agent. 1 ar GNATURE. .E AE EET ADDRESS Y-ST-2IP .E AE EET ADDRESS EET ADDRESS	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agent, or both, in the Stim familiar with, and accept the ob- Stream are with, and accept the ob- OFFICERS / OP LEVIN, HOLLY E 5890 SW 102 ST MIAMI FL DV LEVIN, ALEXANDRA M 5890 SW 102 ST	egent arctiese d'applicable AND DIRE CTORS	83       84       City       tatutes, the above-named covas authorized by the corporation of the corp	rporation submits this statement for the purp ation's board of directors. I hereby accept th	Changing its registere e appointment as registered     Atte     S AND DIRECTORS IN 12     Change Addition
S89 MLA office or re agent. 1 ar GNATURE. LE ME KEET ADDRESS Y-ST-ZIP LE ME KEET ADDRESS Y-ST-ZIP	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agont, or both, in the Stimi familiar with, and accept the ob- Structure, typed or pention more of respected OFFICE RS / DP LEVIN, HOLLY E 5890 SW 102 ST MIAMI FL DV LEVIN, ALEXANDRA M 5890 SW 102 ST MIAMI FL DST	egent arctiese d'applicable AND DIRE CTORS	83       84       City       Itatutes, the above-named covas authorized by the corport 5, Florida Statutes.       Intervention       1001E       Registered Agent's gnature req       13.       1.1 THLE       1.2 NAME       1.3 STREEL ADDRESS       1.4 CITY-ST-ZIP       2.1 THLE       2.3 STREEL ADDRESS       2.4 CITY-S1-ZIP       2.4 CITY-S1-ZIP	rporation submits this statement for the purp ation's board of directors. I hereby accept th	Change Additic
S89 MLA • Pursuant I office or tr agent. 1 ar GNATURE. • I I I I I I I I I I I I I I I I I I	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob Signature, functor pentiet more of respected OFFICE RS / DP LEVIN, HOLLY E 5890 SW 102 ST MIAMI FL DV LEVIN, ALEXANDRA M 5890 SW 102 ST MIAMI FL DST LOUGHLIN, CAROLYN		83       84       City       tatutes, the above-named covas authorized by the corpor.       5, Florida Statutes.       (NOTE Brightered Agenit's gnature req       13.       1.1 THLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 THLE       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 THLE       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 THLE       3.2 NAME	rporation submits this statement for the purp ation's board of directors. I hereby accept th	<b>FL</b> ose of changing its registere         e appointment as registered         SANE         S AND DIRECTORS IN 12         Change       Addition         Change       Addition
Pursuant I office or tr agent. 1 ar GNATURE: EE EE KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE ME KEET ADDRESS Y-ST-ZIP LE ME KEET ADDRESS	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob Signature, which or pentiet none of respected OFFICE RS / DP LEVIN, HOLLY E 5890 SW 102 ST MIAMI FL DV LEVIN, ALEXANDRA M 5890 SW 102 ST MIAMI FL DST LOUGHLIN, CAROLYN 12950 NEVADA ST		83       84       City       tatutes, the above-named covas authorized by the corpor.       5, Florida Statutes.       (NOTE Brightered Agenit's gnature reg       13.       1.1 THLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 THLE       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 THLE	rporation submits this statement for the purp ation's board of directors. I hereby accept th	Change Addition
589 MIA office or tr agent. 1 ar GNATURE LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob Signature, functor pentiet more of respected OFFICE RS / DP LEVIN, HOLLY E 5890 SW 102 ST MIAMI FL DV LEVIN, ALEXANDRA M 5890 SW 102 ST MIAMI FL DST LOUGHLIN, CAROLYN		83       84       City       tatutes, the above-named covas authorized by the corpor.       5, Florida Statutes.       (NOTE Brightmed Agent's gnature req       13.       1.1 THLE       1.2 NAME       1.3 SIREL ADDRESS       1.4 CITY-ST-ZIP       2 1 THLE       2 3 STREEL ADDRESS       2 4 CITY-S1-ZIP       3 1 THLE       3 2 NAME       3 3 STREEL ADDRESS       2 4 CITY-S1-ZIP       3 1 THLE       3 2 NAME       3 3 STREEL ADDRESS       3 4 CITY-S1-ZIP	rporation submits this statement for the purp ation's board of directors. I hereby accept th	Change Addition
589 MIA	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob Signature, which or pentiet none of respected OFFICE RS / DP LEVIN, HOLLY E 5890 SW 102 ST MIAMI FL DV LEVIN, ALEXANDRA M 5890 SW 102 ST MIAMI FL DST LOUGHLIN, CAROLYN 12950 NEVADA ST	errent and use P arrelie and AND Diffe CTORS	83       84     City       tatutes, the above-named cowas authorized by the corpor.       5, Florida Statutes.       (NOTE Brightered Agenit's gnature req       13.       1.1 THLE       1.2 NAME       1.3 STREET ADDRESS       2.4 City-S1-ZiP       2.1 THLE       2.2 NAME       2.3 STREET ADDRESS       2.4 City-S1-ZiP       3.1 THLE       3.2 STREET ADDRESS       2.4 City-S1-ZiP       3.1 THLE       3.2 STREET ADDRESS       3.4 City-S1-ZiP       4.1 THLE       4.2 NAME       4.2 NAME	rporation submits this statement for the purp ation's board of directors. I hereby accept th	Change Addition
589 MIA	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob Signature, which or pentiet none of respected OFFICE RS / DP LEVIN, HOLLY E 5890 SW 102 ST MIAMI FL DV LEVIN, ALEXANDRA M 5890 SW 102 ST MIAMI FL DST LOUGHLIN, CAROLYN 12950 NEVADA ST	errent and use P arrelie and AND Diffe CTORS	83       84     City       tatutes, the above-named covas authorized by the corpor.       5, Florida Statutes.       (NOTE Brightered Agenit's gnature req       13.       1.1 THLE       1.2 NAME       1.3 STREET ADDRESS       2.4 City-S1-ZiP       2.1 THLE       2.3 STREET ADDRESS       2.4 City-S1-ZiP       3.1 THLE       3.2 STREET ADDRESS       2.4 City-S1-ZiP       3.1 THLE       3.2 STREET ADDRESS       3.4 City-S1-ZiP       4.1 THLE	rporation submits this statement for the purp ation's board of directors. I hereby accept th	Change Addition
589 MIA office or reagent. f an GNATURE GNATURE LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob Signature, which or pentiet none of respected OFFICE RS / DP LEVIN, HOLLY E 5890 SW 102 ST MIAMI FL DV LEVIN, ALEXANDRA M 5890 SW 102 ST MIAMI FL DST LOUGHLIN, CAROLYN 12950 NEVADA ST	errent and use P arrelie and AND Diffe CTORS	83       84     City       tatutes, the above-named covas authorized by the corpor.       5, Florida Statutes.       (NOTE Registered Agenit's gnature reg       13.       11 TITLE       1.3 STREEL ADDRESS       1.4 CITY-ST-ZIP       2 TITLE       2.3 STREEL ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREEL ADDRESS       3.4 CITY-ST-ZIP       4.1 TITLE       4.2 NAME       3.3 STREEL ADDRESS       3.4 CITY-ST-ZIP       4.1 TITLE       4.3 STREEL ADDRESS       3.4 CITY-ST-ZIP	rporation submits this statement for the purp- ation's board of directors. I hereby accept th pred when reinstaling) D ADDITIONS/CHANGES TO OFFICER	
589 MIA	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob Signature, which or pentiet none of respected OFFICE RS / DP LEVIN, HOLLY E 5890 SW 102 ST MIAMI FL DV LEVIN, ALEXANDRA M 5890 SW 102 ST MIAMI FL DST LOUGHLIN, CAROLYN 12950 NEVADA ST	AND DIRECTORS	83       84     City       Italutes, the above-named cowas authorized by the corport       5, Florida Statutes.       (NOTE Brightered Agenit's gnature reg       13.       1.1 THLE       1.2 NAME       1.3 STREET ADDRESS       2.4 CITY-ST-ZIP       2.1 THLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 THLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       3.1 THLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 THLE       4.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       5.1 THLE       5.2 NAME	rporation submits this statement for the purp- ation's board of directors. I hereby accept th pred when reinstaling) D ADDITIONS/CHANGES TO OFFICER	
589 MIA office or re agent. 1 an GNATURE GNATURE CET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob Signature, which or pentiet none of respected OFFICE RS / DP LEVIN, HOLLY E 5890 SW 102 ST MIAMI FL DV LEVIN, ALEXANDRA M 5890 SW 102 ST MIAMI FL DST LOUGHLIN, CAROLYN 12950 NEVADA ST	AND DIRECTORS	83       84     City       Italutes, the above-named covas authorized by the corport       5, Florida Statutes.       Italitation       13.       1.1 THLE       1.2 NAME       1.3 STREEL ADDRESS       2.4 CITY-ST-ZIP       2.1 THLE       2.2 NAME       2.3 STREEL ADDRESS       2.4 CITY-ST-ZIP       3.1 THLE       3.2 NAME       3.3 STREEL ADDRESS       3.4 CITY-ST-ZIP       3.1 THLE       3.2 NAME       3.3 STREEL ADDRESS       3.4 CITY-ST-ZIP       3.1 THLE       3.2 NAME       3.3 STREEL ADDRESS       3.4 CITY-ST-ZIP       4.1 THLE       4.2 NAME       4.3 STREEL ADDRESS       4.4 CITY-ST-ZIP       5.1 THLE	rporation submits this statement for the purp ation's board of directors. I hereby accept th	
589 MIA office or re agent. 1 an IGNATURE. 2. IRE MADRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob Signature, which or pentiet none of respected OFFICE RS / DP LEVIN, HOLLY E 5890 SW 102 ST MIAMI FL DV LEVIN, ALEXANDRA M 5890 SW 102 ST MIAMI FL DST LOUGHLIN, CAROLYN 12950 NEVADA ST	AND DIRECTORS	83       84     City       Italutes, the above-named covas authorized by the corport       5, Florida Statutes.       Italitation       13,       1,1 THLE       1,2 NAME       1,3 STREEL ADDRESS       1,4 GITY-ST-ZIP       2 THUE       2 A CITY-ST-ZIP       3 STREEL ADDRESS       2 4 CITY-ST-ZIP       3 1 THLE       3 2 NAME       3 3 STREEL ADDRESS       3 4, CITY-ST-ZIP       4, CITY-ST-ZIP       3 1 THLE       3 2 NAME       3 3 STREEL ADDRESS       3 4, CITY-ST-ZIP       4, THLE       4, 2 NAME       4,3 STREEL ADDRESS       4,4 CITY-ST-ZIP       5,1 THLE       5,2 NAME       5,3 STREEL ADDRESS       5,4 CITY-ST-ZIP       5,1 THLE       5,2 NAME       5,3 STREEL ADDRESS       5,4 CITY-ST-ZIP       6,1 THLE	ADDITIONS/CHANGES TO OFFICER	Image: Change       Addition         Image: Change       Addition
589 MIA office or re agent 1 ar	90 \$W 102 STREET AMI FL 33156 to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the ob Signature, which or pentiet none of respected OFFICE RS / DP LEVIN, HOLLY E 5890 SW 102 ST MIAMI FL DV LEVIN, ALEXANDRA M 5890 SW 102 ST MIAMI FL DST LOUGHLIN, CAROLYN 12950 NEVADA ST	egent and the P apple able AND T MRE CTORS  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE	83       84     City       Italutes, the above-named cowas authorized by the corport       5, Florida Statutes.       Italitation       13,       11, THLE       12, NAME       13, STREEL ADDRESS       14, CITY-ST-ZIP       21, THLE       22, NAME       23, STREEL ADDRESS       24, CITY-ST-ZIP       31, THLE       32, NAME       33, STREEL ADDRESS       34, CITY-ST-ZIP       31, THLE       32, NAME       33, STREEL ADDRESS       34, CITY-ST-ZIP       41, THLE       42, CITY-ST-ZIP       51, THLE       52, NAME       53, STREEL ADDRESS       44, CITY-ST-ZIP       51, THTLE       52, NAME       53, STREEL ADDRESS       54, CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICER	Image: Change       Addition         Image: Change       Addition