FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1998

S46267

(8)

SRG HOLDING, CORP.

FILED Feb 25 1998 8:00am Secretary of State

	ace of Business	Mailing Address					
5201 BLUE LAGOON DRIVE SUITE 100 MIAMI FL 33126 US 5201 BLUE LAGOON DRIVE SUITE 100 MIAMI FL 33126 US			E		DO NOT WRITE IN THIS SE 3. Date incorporated or Qualified 04/15/1991	ACE	
2. Principal	Place of Business	2a. Mailing Add	2a. Mailing Address			4. FEI Number	Applied For
21		26	26			65-0266618	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #	Suite, Apt. #, etc.				\$8.75 Additional Fee Required
City & State		City & State	├ , '			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Z ip 24	Country 25	Zip 29	30	Country		This corporation owes or has paid the curre Personal Property Tax due June 30.	nt year Intangible Yes No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
CAHAN, RICHARD J. ALAN C/O BECKER & POLIAKOFF P.A. 5201 BLUE LAGOON DRIVE SUITE 100				81	Name	7,000	
				62	Street	Address (P.O. Box Number is Not Acceptable)	
MIAMI FL 33126			83				
	_			84	City	FL	85 Zip Code
office or	It to the provisions of Sections 607.09 registered agent, or both, in the Sta am familiar with, and accept the obli	ite of Florida. Such chan	ige was auth	orized by	the cort	corporation submits this statement for the purpose of cooration's board of directors. I hereby accept the appoint	hanging its registered ntment as registered
SIGNATURE	Signature, typed or printed name of registured a	acont and title if applicable	/NOTE: Po	nietorad Acc	nt signature	required when re-installing) DATE	
			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D		ELETE	1.1 TITLE			Change Addition

ROBERTS, GREGORY 1.2 NAME NAME **BAY STREET & VICTORIA AVE.N** 1.3 STREET ADDRESS STREET ADDRESS NASSAU, BAHAMAS CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Addition Change TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET AODRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change ■ Addition TITLE 3.1 TITLE NAME **3.2 NAME** STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 4.1 TITLE TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change ☐ Addition 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 truster 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 attantional with appears.

SIGNATURE:

2/18/98

242-322-1751