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

**PROFIT** CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

ANGONES, HUNTER, MCCLURE, LYNCH & WILLIAMS, P.A.

## **FILED** May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address										- 1 18911616 114 01641 40001 91185 16861 1161 6	IDII BIBII <b>2</b> 481) Q	HOLY WIL	HI 01011 1001	
96 WEST FLAGLER STREET NINTH FLOOR MIAMI FL 33130					66 WEST FLAGLER STREET NINTH FLOOR MIAMI FL 33130					DO NOT WRITE IN THIS SPACE				
										3. Date Incorporated or Qualified 04/16/1991	•			
2. Principal Place of Business					2a. Mailing Address					4. FEI Number		Apı	olied For	
21				26						65-0255214		Not	Applicable	
Suite, Apl #, etc.				27	Suite, Apt. #, etc.					5. Certificate of Status Desired			dditional quired	
City & State				,	City & State					6. Election Campaign Financing	\$5	.00	May Be	
23					28					Trust Fund Contribution	Ad	ded to	Fees	
Zip	Country				Zip Country			′		8. This corporation owes or has paid the current year Intangible				
24	25 9, Name and Address of Current			29	30				····	Personal Property Tax due June 30. Yes No				
		OI CUITOIIL N	egist.	ereo Agent		10. Name and Address of New Registered Agen 81 Name								
MCCLURE, JOHN								rearing						
66 WEST FLAGLER STREET								Street	Addres	ss (P.O. Box Number is Not Acceptable)				
NINTH FLOOR MAMI FL 33130										· · · · · · · · · · · · · · · · · · ·				
ľ	mami pl 33	130					83							
							84	City			FL 85	Zip C	ode	
11. Pursuant	ions of Section	s 607.0502 a	nd 60	7.1508. Florida Statut	es, the a	hove	-named	1 corpo	ration submits this statement for the purpo	= = 1 1	ina its	registered		
office or r	registered ag	ient or both in	the State of I	Florida	a Such change was a Section 607,0505, Fig.	authorize	d by	the cor	poratio	on's board of directors. I hereby accept the	appointmen	it as r	egistered	
1 -	arii rasiiililar wi	ui, and accept	the obligatio	na or,	Section 607.0505, FR	Jilua Sia	ioles	<b>&gt;</b> .						
SIGNATURE	Signature typed	or printed name of re	Systemed agent ar	nd tille il	applicable (NOT	F Ragistere	d Age	ht signatur	e required	d when reinstating) D/	ATE			
12.					DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS	AND DIREC	TORS	S IN 12	
TITLE	DP				☐ DELETE	1.1 Ti	TLE				☐ Cha	пде	☐ Addition	
NAME		JRE, JOHN				1.2 N	AME							
STREET ADDRESS	ŀ	ST FLAGLER	STREET			1.3 \$1	THEET	ADDRESS						
CITY-ST-ZIP	MIAM	FL			· · · · · · · · · · · · · · · · · ·	1.4 CI	TY-S	T-ZIP	<u> </u>					
TITLE	VPD		_		☐ DELETE	2.1 10	TLE				☐ Cha	nge	Addition 1	
NAME		r, steven i				2.2 N	AME							
STREET ADDRESS		ST FLAGLER	STREET			2.3 S	REET	ADDRESS						
CITY-ST-ZIP	MAMI	<u>FL</u>						ST-ZIP			···			
TITLE	VPD		IPA		DELETE	3.1 TI					☐ Cha	oge	L_ Addition	
NAME		I, CHRISTOP				3.2 N/								
STREET ADDRESS		ST FLAGLER	81					ADDRESS						
CITY-ST-ZIP	MAM	rl			DC: 275	_		T-ZIP	<b> </b>				——————————————————————————————————————	
TITLE	VPD	MO OTENAS	T D		☐ DELETE	4.1 T)					L Cha	nge	☐ Addition	
NAME		MS, STEWAR				4 2 N							ľ	
STREET ADDRESS	MIAMI	ST FLAGLER	OIMEEI					ADDRESS						
CITY-ST-ZIP	DST	<u>FL</u>			DELETE	44 DI		T-ZIP	<del> </del>				T Addition	
TITLE		NEG EDANNI	eco p		☐ DELEHE	5.1 TI			1		☐ Chai	រដិទ	Addition	
NAME CTREET ADDRESS		NES, FRANCI ST FLAGLER				5.2 N/								
STREET ADDRESS		SI FLAGLER FL 33130	OINEEI					ADDRESS						
CITY-ST-ZIP TITLE	MINAMI	FL 33 130			DELETE	5.4 CI		t - ZIP	├		☐ Chai	000	Addition	
NAME						6.1 TI					L Cha	ifle	L_ AUGITION	
						62 N/		ADDRESSE						
STREET ADDRESS								ADDRESS						
CITY-ST-ZIP				$\overline{}$		6.4 CI	TY - \$1	T-ZIP	1					

14. I hereby certify that the information supplied with this using do-indicated on this annual report or supplemental annual report officer or director of the corporation or the absolver or flasted Block 12 or Block 13 if changed, or on an attachment withfan not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an ipowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

**SIGNATURE:** 

4/23/98

305-371-5000