

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 08 1998 8:00 am
Secretary of State

DOCUMENT # S54507 (6)
1. Corporation Name
SST NATIONWIDE, INC.



Principal Place of Business Mailing Address
8390 NORTHWEST 53RD STREET // 8390 NORTHWEST 53RD STREET //
SUITE 300 SUITE 300
MIAMI FL 33166 MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 3051 NW 129 ST 26
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 OpaLocka FL 28
Zip Country Zip Country
24 33054 25 Dade 29 30

3. Date Incorporated or Qualified
05/23/1991
4. FEI Number 65-0418308 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
AUSTIN, RICHARD B. ESQUIRE
8390 NORTHWEST 53RD STREET
SUITE 300, ROCHESTER BUILDING
MIAMI FL 33166
** RESIGNED 4/1/98

10. Name and Address of New Registered Agent
81 Name Jose F. Vega
82 Street Address (P.O. Box Number is Not Acceptable) 3051 NW 129 ST
83
84 City OpaLocka FL 85 Zip Code 33054

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and date of application

(NOTE: Registered Agent signature required when reinstating)

DATE

4-28-98

12. OFFICERS AND DIRECTORS
TITLE P
NAME VEGA, JOSE F.
STREET ADDRESS 8390 NW 53RD STREET XXX
CITY-ST-ZIP MIAMI FL
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
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NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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 trustee 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 attachment with an address.

SIGNATURE:

Jose F. Vega

APR 28 1998 (305) 685-1920

CR2E034 (10/97)