07-15-56 305-238-6896

SECOND NOTICE: CORPORATION	WILL BE DISSOLVED ON	OR AFTER SEPTEMBER 30,	1998.
AMOUNT DUE ON OR BEFORE 09/30/98:	\$550 (IF DISSOLVED, MINIMUM.	AMOUNT DUE TO REINSTATE: \$750)	

SIGNATURE: HOWARD A MEST Should Mill 1900

ÇOR ANNU	PROFIT PORATION IAL REPORT	RATION Sandra B. Morti REPORT Secretary of Sta		Mortha of State	m		FILED 98 JUL 30 AM 10: I	2		
	MENT # S7	3851	' (5)				15 DUE OU AN IOF I	Ů.		
1. Corporation	-	0001	(5)				SEASE IA LI DE STAT	Œ.		
RODEO,	INÇ.						TALLAHASSEE, FLORI		#### #################################	
Principal Place	e of Business	Má	alling Address				- 1 10831010 461 70006 76101 76101 61101 1101 01011 761			
12727 S. DIXIE HIGHWAY 12727 S. DIXIE HIGHWAY										
MIAMI FL 33150	0-5844	MIA	MI FL 33156-5944				DO NOT WRITE IN THIS	SPACE		
1							3. Date Incorporated or Qualified			
O Dringle of D	land of Divisions		Marian Address				08/12/1991			
2. Principal Place of Business 2a. Mailing Address 2b. 2c. 2c. 2c. 2c. 2c. 2c. 2c. 2c. 2c. 2c					4. FEI Number Applied For 65-0277083 Not Applicable			ot Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired	\$8.75	Additional tequired		
City & State		[27]	City & State		-		6. Election Campaign Financing		May Be	
23		28					Trust Fund Contribution		to Fees	
Zip 24	Country 25	29	Zip	Count	ry		8. This corporation owes or has paid the curre Personal Property Tax due June 30.	ntyearln Yes	tangible No	
	9. Name and Addres			1			10. Name and Address of New Registered A			
	W AGENTS, INC.			8	1	Name				
	DATRAN CENTER, P			8	2	Street Addres	ss (P.O. Box Number is Not Acceptable)			
9100 SÕ. DADELAND BLVD.		8	3							
MIAMI FL 33156		L								
	`			8	4	City	FL	85 Zip	Code	
office or agent. I a	registered agent, or both, am familiar with, and acco Signature, typed or printed name	in the State of Florid ept the obligations of or registered agent and title it	da. Such change was au , section 607.0505, Flori applicable (NOTE	thorized E da Statuti E: Registered	es.	the corporation	ation submits this statement for the purpose of cha n's board of directors. I hereby accept the appoin ad when reinstating) DATE	ment as r	egistered	
12.	PD	FICERS AND DIRE	DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND	Change	——————————————————————————————————————	
NAME	MESH, RONNA		L. J DECE IE	1.2 NAME			8 0000260 8	626	}2	
STREET ADDRESS	12751 S.W. 150TH LANE		1.3 STREET ADDRESS		ADDRESS	-08/05/98- - 0				
CITY-ST-ZIP	MAMI FL SD			1.4 CITY		ZIP	****150.00	****	150.00	
TITLE NAME	MESH, SANDRA		DELETE	2.1 TITLE 2.2 NAME			L	_ Change	Addition	
STREET ADDRESS	12240 S.W. 89 AVE			2.3 STREE		ADDRESS				
CITY-ST-ZIP	MIAMI FL			2.4 CITY		ſ	<u>.</u>			
TITLE	TD		DELETE	3.1 TITLE				Change	Addition	
NAME	MESH, HOWARD 12240 S.W. 89 AVE.			3.2 NAME						
STREET ADDRESS CITY-ST-ZIP	MIAMI FL			3.3 STREI 3.4 CITY-		- 1			}	
TITLE			DELETE	4.1 TITLE				Change	Addition	
NAME			<u> </u>	4.2 NAME	Ē					
STREET ADDRESS				4.3 STREI	ET A	ADDRESS				
CITY-ST-ZIP TITLE			[]	4.4 CITY-		ZIP		7		
NAME		1	L_] DELETÉ	5.1 TILLE 5.2 NAME			L	_] Change	☐ Addition	
STREET ADDRESS				5.3 STREE		ADDRESS				
CITY-ST-ZIP				5.4 CITY-	ST-Z	ZIP				
TITLE			DELETE	6.1 TITLE				Change	A Amportage	
NAME CTREET ADDRESS				6.2 NAME		LDDBESS		4	MADIN'S	
STREET ADDRESS CITY-ST-ZIP				6.4 CITY-		j			110	
14. I hereby ce	or this annual report or si	supplied with this filin	g does not qualify for the	exemptio	on s	stated in section	on 119.07(3)(i), Florida Statutes. I further certify the	at the info	rmation I am	
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.										