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

DOCUMENT # S74550 (2)								
WATCH ISLAND, INC.						1		
ITAIUI	I IOLAIAD, IIAO.					A ARBITATA JOS ARBOTA ASTRO DOSS MASS RADIO MADO	ANDIA BIDA BIBI	I 818 () (8 8)
Principal Plac	e of Business	Mailing Address				I IDBINOM EN CORIL OLDEN BILAN ALNIK OBIN ORDIK ONDIK	Aldii 41811 Albi	
21 1/2 NE 1ST AVENUE #9 21 1/2 NE 1ST AVENUE #9			#9			}		
MIAMI FL 331	MIAMI FL 33131	33131			DO NOT WRITE IN THIS S	SPACE		
						3. Date Incorporated or Qualified		
						08/20/1991		İ
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number	Ar	plied For
21 26						65-0279937		ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired	\$8.75 A	
27						6. Election Campaign Financing	\$5.00	
23		28				Trust Fund Contribution	Added	to Fees
Zip	Country	Zıp	Cour	itry		8. This corporation owes or has paid the curr		
24	25	29	30					No
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New Registered	Agent '	
	ARBIN, EVAN R. ESQUIRE		[INBITIE			
48 EAST FLAGLER STREET				B2	Street Addre	ess (P.O. Box Number is Not Acceptable)		
SUITE 374 MIAMI FL 33131			1	B3				
MIL			Ļ	\downarrow			11-	
I			'	B4	City	FL	85 Zip 1	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the				ove-	named corp	oration submits this statement for the purpose of	changing it	s registered
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								
12.	Signature, typed or printed name of registered ager OFFICERS AND		13.	Agen	t signature require	od when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 12
TITLE	D	DELETE				, (COTT) (COTT) (COTT) (COTT) (COTT)	Change	Addition
NAME	AYUB, MOHAMMED 121		1.2 NAA	1.2 NAME				
STREET ADDRESS	2008 JACKSON STREET C-1		1.3 STREET ADDRESS		DDRESS			Į
CITY-ST-ZIP	HOLLYWOOD FL			1.4 CITY-ST-ZIP				
TITLE	(2.1 TITL		- 1		Change	☐ Addition
NAME			2.2 NAN					
STREET ADDRESS	HOLL WHO OR C		2.3 SIM 2. 4 CIT		ADDRESS			ľ
CITY-ST-ZIP TITLE	1 1IOLET WOOD TE	DELETE 311			- 211		Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STR	EET A	DDRES\$			ļ
CITY-ST-ZIP			3.4. CIT	Y-ST	- ZIP			
TITLE		☐ DELETE	4.1 TITLE				Change	☐ Addition
NAME			4. 2 NA)
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP TITLE	<u> </u>	☐ DELETE	4.4 CITY - ST 5.1 TITLE		ZIP		Change	☐ Addition
NAME		O.c.c.ic	5.2 NAN		1		- Silvingo	
STREET ADDRESS					LDDRESS			ľ
CITY-ST-ZIP			5.4 CITY					Ì
TITLE		☐ DELETE	6.1 THL				Change	Addition
NAME			6.2 NAN	Æ	Ì			}
STREET ADDRESS			6.3 STR	EET A	NDDRESS			

64 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, of on an attachment with an address.

FILED

May 01 1998 8:00am

Secretary of State