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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENTO P STATE

Sandra B. Mortham

Secretary of State .

DIVISION OF CORPORATIONS

1997
DOCUMENT #

5 86036

PTS, INVESTMENTS, INC.

FILED

97 JUL -9 PH 1:26

SECREMANY OF STATE TALLAHASSES, FLORIDA

302-268-8600

Principal Prace of Business Mailing Address					
7150 W. 20 Avenue #2	16				
Hialeah, FL 33016 same				3. Date incorporated or Qualified	3a. Date of Last Report
				57 Pale insorporated or Guarried	Ja. Date of Last Report
2. Principal Place of Business	2a. Mailing Address			4. FEI Number 65-0287672	Applied For
21 26				65-028 1672	Not Applicab €
Suite. Apt. #, etc. Suite. Apt. #, etc. 22				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution	Added to Fees
Zip Country			,	B. This corporation has liability for in	
24 25		30			Yes No
9. Name and Address of Cur	rent Hegistered Agent	B1	Name	10. Name and Address of New Reg	listered Agent
DAW CONVER					
PANE SMINI		82	Street A	ddress (P.O. Box Number is Not Acceptabl	e)
PAUL SALVER 5881 NW 151 ST. SUITE 101		83			
SUME 101	1//	84	City		85 Zip Code
MIAMI LAKES, FL 330.	/9				FL
 Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the St. 	ate of Florida. Such change was a	uthorized by	the corpo	corporation submits this statement for the publication's board of directors. I hereby accept	rpose of changing its registered. I the appointment as registered.
agent. I am familiar with, and accept the ob	ligations of, Section 607.0505, Flo	rida Statutes	š.	,	,,
SIGNATURE Signature typed or printed name of registered	Agent and file if applicable (NOTE	Registered Age	ent signature re	equired when reinstating)	DATE
	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	
TITLE DIP	☐ DELETE	1.1 TITLE			Change Addition
NAME STEARNS, PAME	LA T.	1.2 NAME	ĺ	7000022	366275
STREET ADDRESS 7150 W. 70 DH AYE #216		1.3 STREET ADDRESS		-07/11/9	366275 0701127005
Gittester		1.4 CITY - S	T-ZiP	***165	Change Addition
NAME THACTON 12 33	0/16	2.1 TITLE 2.2 NAME			Li Change Li Addition
STREET ADDRESS		23 STREET	ADDRESS		
City - St- ZiP		2 4 City-5	- 1		
TITLE	☐ DELETE	3 1 TITLE	/·· <u></u>	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME		32 NAME			
STREET ADDRESS		3 3 STREET	ADDRESS		
CITY-ST-ZIP	- I priest	3.4 CITY-S	ST-ZIP		A 17 05 17 440
TITLE	DELETE	41 TITLE	. [M	Change L. Addition
NAME STREET ADDRESS		4 2 NAME	***************************************	CHA .	\M\\
CITY-ST-ZIP		43 STREET 44 CITY - S	ŀ	V 1/	J
TITLE	☐ DELETE	5 1 TITLE	1.51		Change Addition
NAME	•	5 2 NAME			
STREET ADDRESS		5 3 STREET	ADDRESS		
CITY-ST-ZIP		5 4 CITY - S'	1 - ZIP		
TITLE	☐ DELETE	51 TITLE	i		Change Addition
NAME		62 NAME	-		
STREET ADDRESS		63 STREET	- 1		
14. I do hereby certify that the information supp	lied with this filing does not qualify	64 CITY-S'		sted in Section 119.07/3Vi) Florida Statutos	Liuther certify that the
information indicated on this annual report of I am an officer or director of the corporation	or supplemental annual report is tr	ue and accu	rate and t	that my signature shall have the same legal	effect as if made under path, that
appears in Block 12 of Block 13 if changed	, or on an attachment with an add	ress.	010 H112 16	port as required by chapter our, Florida St	stotes, and that my name