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 # S87504

(4)

FILED Jan 26 1998 8:00am Secretary of State

S.I	M.A.C. OF DADE, INC.	Mailing Address					
6400 SOUTH DIXIE HIGHWAY 6400 SOUTH DIXIE HIGHW MIAMI FL 33143 MIAMI FL 33143					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 10/14/1991		
2. Princ 21	cipal Place of Business	Place of Business 28. Mailing Address 26			4. FEI Number 65-0295443	 - - - - - - - - - -	oplied For of Applicable
	Apt. #, etc. Suite, Apt. #, etc. 27					\$8.75 / Fee Re	
	& State	City & State	y & State		Election Campaign Financing Trust Fund Contribution	\$5.00	
Zip 24	Country 25	Zip	Counti	ſу	8. This corporation owes or has paid Personal Property Tax due June 3		tangible
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Regi	stered Agent	
	TERMINELLO, LOUIS J. 2700 SW 37TH AVENUE		8				
	MIAMI FL 33133		8:		ress (P.O. Box Number is Not Acceptable	·)	
			84			85 Zip (Code
11. Pur	suant to the provisions of Sections 607.0	502 and 607.1508, Florida Statu	ites, the abor	ve-named corp	poration submits this statement for the pur tion's board of directors. I hereby accept	rpose of changing it	s registered
age	int. I am familiar with, and accept the ob-	igations of, Section 607.0505, F	lorida Statute	es.	·		- Tagiolovou
	Signature, typed or printed name of registered			jent signature requir	red when reinstating)	DATE	
12.	PVPS OFFICERS A	ND DIRECTORS DELETE	13.	 ··	ADDITIONS/CHANGES TO OFFICE	HS AND DIRECTOR Change	Addition
NAME	LINE DAMPA		1.2 NAME			⊏ снапус	Lad Addition
STREET ADI	A 466 COURT I BUVE LUCURA	ΔV					
-	BALAGAI EI	n i	1.3 STREET ADDRESS				
CITY-ST-Z	IN THINKIN I C	DELETE	2.1 TITLE	SI-ZIP		Change	Addition
NAME	1		2.2 NAME	1			
STREET ADI	DRESS			T ADDRESS			
CITY-ST-Z			2. 4 CITY - ST - ZIP				
TITLE			3.1 TITLE	31 21		Change	Addition
NAME	32.1		3.2 NAME				
STREET AD	DRESS 3.3		3.3 STREE	T ADDRESS			J
CITY-ST-Z			3.4. CITY-	-ST-ZIP			
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STREET ADI	DRESS		4.3 STREE	T ADDRESS			
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TITLE	↓		6 1 TITLE			☐ Change	Addition
NAME			6.2 NAME	ſ			
STREET ADD	f			T ADDRESS			
CITY-ST-ZI		with this filing dose not qualify f	64 CITY-		Section 119 07/3Vi) Florida Statutes fu	other partific that the	information

rnevery certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio indicated on this anyual 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 or on a state of the corporation of the receiver of 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 or on a state of the corporation of the receiver of the corporation of the receiver of the corporation of the corpo