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 #

1. Corporation		[#] 39934	S (S)				
Principal Place of Business Mailing Address						n industrial at a latina sussessible sits district as a second sits as a s	g MIMIT MINIT ATAIT NINIT MINIT SAN
407 LINCOLN RD. 407 LINCOLN RD.							
SUITE BE MIAMI BEACH	1 51 22120		SUITE BE MIAMI BEACH FL 33139			DO NOT WRITE IN T	THIS SPACE
HIRMI PEROTTE SOLOS					3. Date Incorporated or Qu		
						12/11/1991	
2. Principal P	lace of Busin	ess	2a. Mailing Address			4, FEI Number	Applied For
21			28			65-0311208	Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		<u> </u>	City & State				Fee Required
23	5		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip		Country	Zip	Country		8. This corporation owes or has paid the	
24	25		29 30		Personal Property Tax due June 30. Yes No		
		and Address of Curre	nt Registered Agent			10. Name and Address of New Registe	ored Agent
	UCKER, A.			61	Name		
801 NE 187TH STREET				82	Street Add	fress (P.O. Box Number is Not Acceptable)	
SUITE 308							
NORTH MIAMI BEACH FL 33162							
				84	City	i	FL 85 Zip Code
11. Pursuant	to the provisi	ons of Sections 607.050	02 and 607.1508, Florida Statuti	es, the above	e-named cor	poration submits this statement for the purpo	se of changing its registered
office or re agent. I as	egi st ered ag m f a miliar wil	ent, or b oth, in the State th, an d a ccept the oblig	e of Florida. Such change was a pations of, Section 607.0505, Flo	authorized by orida Statutes	the corpora	ition's board of directors. I hereby accept the	appointment as registered
SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable (NOTE: I					nt signature requ		VTE
12.	OFFICERS AN		DELETE	13.		ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	HAUGLAND, TERJE			1.2 NAME			
STREET ADDRESS	407 LINCOLN RD., #8E			1.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL 33139			1.4 CITY-ST-ZIP			
TITLE	V		DELETE	2.1 TITLE			Change Addition
NAME	HAUGLAND, MARIE			2.2 NAME			
STREET ADDRESS	407 LINCOLN RD., #8E			2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI BEACH FL 33139			2. 4 CITY-ST-ZIP			217 711
TITLE			☐ DELETE	3.1 TITLE		-	Change Addition
NAME				3.2 NAME			
STREET ADDRESS	20			3.3 STREET ADDRESS 3.4. CITY-ST-ZIP			
TITLE			DELETE	4.1 TITLE	11-ZIP		Change Addition
NAME			<u> </u>	4. 2 NAME			_ ,
STREET ADDRESS	s			4.3 STREET	ADORESS		
CITY-ST-ZIP				4.4 CITY - ST			
TITLE	DELETE		5.1 TITLE			Change Addition	
NAME				52 NAME	1		
STREET ADDRESS				5.3 STAEET	ADDRESS		
City-St-ZiP			Donre	5.4 CHTY-ST	r - ZIP		Change
TITLE			DELETE	6.1 TITLE			Change Addition
NAME CTOSET ADODESE				6.2 NAME	400neec		
STREET ADDRESS				6.3 STREET	ADDHESS		

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 chapter 607, or on an attachment with an address.

FILED

Jan 28 1998 8:00am

Secretary of State