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

CORPORATION **ANNUAL REPORT**

1998



Secretary of State DIVISION OF CORPORATIONS

(8)

FILED Mar 19 1998 8:00am Secretary of State

Principal Place	ISOND STREET	Mailing Address 22001 SW 252ND STF HOMESTEAD FL 3303 US			DO NOT WRITE IN TH	,
—	lace of Business	2a. Mailing Address	····································		4. FEI Number	Applied For
		Suite, Apt. #, etc.	Ite, Apt. #, etc.		65-0306353 5. Certificate of Status Desired □	Not Applicable \$8.75 Additional
22		27				Fee Required
City & State	_ `		•		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip			8. This corporation owes or has paid the	current year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
CO	9. Name and Address of Curre NST, DIETER A.	nii negistereu Agent		31 Name	10. Name and Address of New Register	an uðaur
22001 S.W. 252ND STREET					de de la Constantina de la Nota Accessable.	
HOMESTEAD FL 33031			['	Street Ad	dress (P.O. Box Number is Not Acceptable)	
			[i	93		
			ļī.	34 City		85 Zip Code
41 Prirement	to the provisions of Sections 607 05	02 and 607 1508 Florida Sta	tutes the ah	ove-pemed co		e of changing its registered
office or r	egistered agent, or both, in the State	le of Florida. Such change wa	as authorized	by the corpor	orporation submits this statement for the purpost ation's board of directors. I hereby accept the	appointment as registered
SIGNATURE	At laminar with, and accept the con	gations of, Section corticosos,	Tionaa otalo	100.		
SIGNATURE	Signatura, typed or printed name of registered a		NOTE Registered	Agent eignature req	gulred when reinstating) DAT	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD ERNST, DIETER A.	DELETE	1.1 111			Change Addition
NAME	22001 SW 252ND ST		1.2 NA	_		
STREET ADORESS	HOMESTEAD FL			EET ADDRESS		1
CITY-ST-ZIP TITLE	81D			Y-ST-ZIP .E		Change Addition
NAME	ERNST, IRENE S.		2.2 NA	· •		
STREET ADDRESS	22001 SW 252ND ST			EET ADDRESS		
CITY-ST-ZIP	HOMESTEAD FL			Y-ST-ZIP		
TITLE		☐ DELETE	3.1 TIT			☐ Change ☐ Addition
NAME			3.2 NAJ	AE		[
STREET ADDRESS			3.3 STR	EET ADDRESS		
CITY-ST-ZIP			3.4. CH	Y-ST-ZIP		
TITLE		☐ DELETE	4.1 TIT	Æ		Change Addition
NAME			4.2 NA	ME		
STREET ADDRESS			4.3 STR	EET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		☐ DELETE	5.1 717			Change L Addition
NAME			5.2 NA			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CIT 6.1 TITI	Y-ST-ZIP		Change Addition
NAME		- order	6.2 NA			— commy — resulted
STREET ADDRESS			- 1	EET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
	certify that the information supplied	with this filing does not qualify			in Section 119.07(3)(i), Florida Statutes. I furthe	r certify that the information

try signature shall have the same legal effect as it made under oath; that I am a report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: