## 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

POCUMENT #

(3)

		FILEI	)
Feb	06	1998	8:00am
Se	cre	tary o	of State

CASO	N ENTERP	RISES, INC.				•	
Principal Plac	e of Business	<del></del>	Mailing A	ddress			- I I BERK BUIDER HIR IN DIE HORE BUIDE HERF BUIDE HERF BEDEL BURIE BEDEL BURIE BURI
1035 N.E. 12	STH STREET		1035 N.E	. 125TH STREET	ī		
SUITE 205 SUITE 205					DO NOT WORT WITHIN COVOL		
NORTH MIAMI FL 33161		NORTH I	NORTH MIAMI FL 33161			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
							03/20/1992
2. Principal F	Place of Busin	ess	2a. Mailm	g Address			4. FEI Number Applied For
21		26	26			65-0321297 Not Applicable	
Suite, Apt. #, etc.		Suite,	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
22		27				Fee Required	
City & Stat	te		—	State			6. Election Campaign Financing \$5.00 May Be
<b>23</b> Zip	<del>-</del> 1	Country	28 Zin		Countr		Trust Fund Contribution Added to Fees
24	<u> </u>	25	29		30	у	8. This corporation owes or has paid the current year Inlangible Personal Property Tax due June 30. Yes No
27		and Address of Cu		lgent	301		10. Name and Address of New Registered Agent
WI		RENCE D ESQ.		-5	81	Name	· · · · · · · · · · · · · · · · · · ·
			STANTON, FT A	L.	<u> </u>	Stroot A	Address (D.O. Boy Number in Not Acceptable)
Hornsby, Sacker, Zelman, Stanton, et al. 1401 Brickell Avenue, Suite 700			04	82 Street Address (P.O. Box Number is Not Acceptable)			
	AMI FL 3313				83		
					84	City	<b>85</b> Zip Code
	_						FL [ ]
11. Pursuant	to the provision	ons of Sections 607	.0502 and 607.1508	B. Florida Statut	es, the abov	re-named o	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
agent. I s	ım f <b>a</b> miliar wit	h, an <b>d a</b> ccept the o	bligations of, Section	on 607.0505, Flo	orida Statute	утне согр \$.	riporation's board or directors. Thereby accept the appointment as registered
SIGNATURE							
12.	Signature, typed o	or printed name of registere	d agent and title if applicat AND DIRECTORS	tire (NOI	F Registered Ag	nnt signature r	re required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PST	OFFICENS	AND DIRECTORS	DELETE	1.1 TITLE		Change Addition
NAME		RICHARD F			1.2 NAME		
STREET ADDRESS		. 190TH STREET	<b>#103</b>			T ADDRESS	
CITY-ST-ZIP		RA FL 33180			1.4 CITY		
TITLE			· · · · · · · · · · · · · · · · · · ·	DELETE	21 TITLE		Change Addition
NAME	3				22 NAME	1	
STREET ADDRESS					23 STREE	T ADDRESS	
CITY-ST-ZIP					2 4 CITY-	ST-ZIP	
TITLE				DELETE	3 1 THTLE	T	Change Addition
NAME	1.				3.2 NAME		
STREET ADDRESS						T ADDRESS	
CITY-ST-ZIP				DUISTS	3.4 CITY-	S1-ZIP	
TITLE				DELETE	4.1 TITLE		Change Addition
NAME					4. 2 NAME	1	
STREET ADORESS						ADDRESS	
CITY-ST-ZIP TITLE			<del> </del>	DELETE	4.4 CITY -: 5.1 TITLE	51-ZIP	Change ☐ Addition
NAME				>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5.1 THE		Addition
STREET ADDRESS						ADDRESS	$1 \qquad 1 \qquad$
CITY-ST-ZIP					5.4 CiTY-:		41) 6
TITLE	<del></del>			DELETE	6.1 TITLE		Addition
NAME					6.2 NAME		2000024235/72 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
STREET ADDRESS						ADDRESS	-02/06/3801052001
CITY-ST-ZIP					6.4 CITY-1		***150.00
There		7 for 10 for	-,				·

Thereby 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 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 on a state timent with an address.