## 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

1. Corporation	MEN # <b>V5299</b> 9	9 (2)						
PRUDENCE INVESTMENTS, INC.								
Principal Place of Business Mailing Address						- C THINK I NIGHER BEREN HINKIN INKLIN (BERFU INKLI HENGEL NEUTE)	RIBAI BIBIA OM	H)
C/O YAFFA D	DERMER	C/O YAFFA DERMER						
2525 FLAMINGO PLACE 2525 FLAMINGO PLACE						DO NOT WRITE IN THIS S	DACE	
MIAMI BEACH FL 33140-4318 MIAMI BEACH FL 33140-4318						3. Date Incorporated or Qualified		
						07/22/1992		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	I IA	pplied For
21 26						65-0351307	<u> </u>	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.							···· · · · · · · · · · · · · · · · · ·	Additional
22 27						5. Certificate of Status Desired	Fee R	equired
City & State City & State						6. Election Campaign Financing		May Be
23	28					Trust Fund Contribution		to Fees
Zφ	Country	L Zip	Cou	ntry	•	8. This corporation owes or has pald the curr		
24	25	29	30					No
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New Registered A	gent	
1	RMER. YAFFA			۱"	Name			
2525 FLAMINGO PLACE					Street Addre	ess (P.O. Box Number is Not Acceptable)		
MIAMI BEACH FL 33140				83				
				"				
			Ī	84	City	FL	<b>85</b> Zìp	Code
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named co- office or registered agent, or both, in the State of Florida. Such change was authorized by the corporagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						pration submits this statement for the purpose of	changing i	its realistered
office or re	egistered agent, or both, in the State	of Florida, Such change was	authorized	i by	the corporation	on's board of directors. I hereby accept the appoint	ointment as	registered
	m tamiliar with, and accept the obliga	tions of, Section 607.0505, F	ionga Stati	utes	<b>5.</b>			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent and title if applicable.)					ent signature require	d when reinstating) DATE		<del></del>  ,
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	D	DELETE	1.1 TIT	LE			Change	☐ Addition
NAME	DERMER, YAFFA		1.2 NA	ME				
STREET ADDRESS	2525 FLAMINGO PL.		1.3 ST	REET	ADDRESS			į.
CITY-ST-ZIP	MIAMI BEACH FL 33140-4318		1,4 CI3	Y-S	T- ZIP			
THTLE	D	☐ DELETE	2.1 TIT	LE			Change	Addition
NAME	ROSENTHAL, PRUDENCE		2.2 NA	ME				
STREET ADDRESS	2105 DEVONSHIRE RD.		2.3 ST	REET	ADDRESS			
CITY-ST-ZIP	ANN ARBOR MI		2. 4 Ci		ST-ZIP			T A LECT.
TITLE		DELETE	3.1 ТП				Change	Addition
NAME			3.2 NA		1			
STREET ADDRESS					ADDRESS			
CiTY - ST - ZiP		l loci cor	3.4. CI		T-ZIP		Change	Addition
TITLE		☐ DELETE	4.1 TiT		•		Ghange	i Addition
NAME			4. 2 N/					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		Dry TTE	4.4 CIT		T-ZIP		Change	Addition
TITLE		☐ DELETE	5.1 T/T			•	— Manye	
NAME			5.2 NA					
STREET ADDRESS					ADDRESS			
CITY - ST - ZIP		- I beiere	5,4 CH		T-ZIP		Change	L_ Addition
TITLE		DELETE	6.1 TiT	LĽ	I		my Anguide	Last Naghtigh

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 changed, or on an attachment with an address.

6.2 NAME

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

**FILED** 

Jan 21 1998 8:00am

Secretary of State