

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

FILED
Apr 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V55411 (5)
1. Corporation Name
CREDIT COMPANY OF MIAMI, INC.



Principal Place of Business 2044 BISCAYNE BLVD. MIAMI FL 33137 US	Mailing Address ONE S.E. THIRD AVE. #2130 MIAMI FL 33131 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Sulte, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 2060 BISCAYNE BLVD. 27 Sulte, Apt. #, etc. 28 SECOND FLOOR 29 City & State 30 MIAMI, FLORIDA 31 Zip 32 33137-5024 33 Country 34 USA	3. Date Incorporated or Qualified 08/05/1992 4. FEI Number 65-0348960 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KRIEGER, STANLEY J
ONE S.E. THIRD AVE.
SUITE 2130
MIAMI FL 33131

81 Name STANLEY J. KRIEGER 82 Street Address (P.O. Box Number is Not Acceptable) 2060 BISCAYNE BLVD. 83 SECOND FLOOR 84 City MIAMI, FL 85 Zip Code 33137
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  STANLEY J. KRIEGER 3/19/98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BRAMAN, NORMAN 1 S.E. 3RD AVE., #2130 MIAMI FL <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2060 BISCAYNE BLVD., SECOND FLOOR MIAMI, FLORIDA 33137-5024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KRIEGER, STANLEY J. 1 S.E. 3RD AVENUE, #2130 MIAMI FL <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2060 BISCAYNE BLVD., SECOND FLOOR MIAMI, FLORIDA 33137-5024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BERNSTEIN, ROBERT 1 S.E. 3RD AVE., #2130 MIAMI FL <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2060 BISCAYNE BLVD., SECOND FLOOR MIAMI, FLORIDA 33137-5024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2060 BISCAYNE BLVD., SECOND FLOOR MIAMI, FLORIDA 33137-5024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2060 BISCAYNE BLVD., SECOND FLOOR MIAMI, FLORIDA 33137-5024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2060 BISCAYNE BLVD., SECOND FLOOR MIAMI, FLORIDA 33137-5024

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.

SIGNATURE:  STANLEY J. KRIEGER, SECY 3/19/98(305)576-1889

CR2E034 (10/97)