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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

FILED Feb 25 1998 8:00am Secretary of State

LAW OF	THUES OF JETTHET S. W	ICINCO, FIXI			
Principal Place	of Business	Mailing Address		T (ODE B)(DIO DIOS DIOS DESENTRO DE COLO DE CO	i Biğiy dibil bibir gibil gibil ibbi
9130 S DADELAND BLVD		9130 S DADELAND BLVD	1		
TWO DATRAN	CENTER. STE. 1910	TWO DATRAN CENTER, STE. 1910		DO NOT WRITE IN THIS SPACE	
MIAMI FL 33156		MIAMI FL 33156 - 7858		3. Date Incorporated or Qualified	
US		us , s	• •	09/21/1992	
9 Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
· · ·	ace of Business	26		65-0356526	Not Applicable
Suite, Apt #, etc		Suite, Apt. #, etc			CQ 75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State	,	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zıp	Gountry	Zip	Country	8. This corporation owes or has paid th	
24	25	[29]	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registe	ared Agent
WEI	NER, JEFFREY S.		81 Name		,s
TWO	D DATRAN CTR		82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
\$19	10				
MLA	MI FL 33156		83		
			84 City		85 Zip Code
				poration submits this statement for the purpo	FL
SIGNATURE	Signature, tyraid or probabilisms of rejective Li OFFICERS A	ND DIRI CTORS	E. Ring stored Agent signature required.	ired when roinstating) ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	WEINER, JEFFREY S.	5 . 1916	1.2 NAME		•
STREET ADDRESS	9130 S DADELAND BLVD,	in the live	1.3 STREET ADDRESS		
CITY-ST-ZIP	9130 S DADELAND BLVD, MIAMI FL 33156-7	828	1.4 CHY-ST-ZIP		The same and the s
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	3.1 TITLE		LT Cusufie LT Vocation
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-7IP		DELETE	3.4. CITY-ST-ZIP		Change Addition
TITLE		□ rett it	4.1 TITLE		- Ontingo - Partition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-\$1-ZIP		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		☐ Change ☐ Addition
TITLE		[] Dittell	5.2 NAME		
NAME STREET ADDRESS			5.3 STREET ADDRESS		
			5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		DELEIE	61 TITLE	*	Change Addition
NAME		L	62 NAME		·
STREET ADDRESS			63 STREET ADDRESS		
STHEET AUDMESS			6.4 CITY-ST-ZIP		
14. I hereby o	sertify that the information supplied	with this filing does not qualify I	for the exemption stated in	n Section 119.07(3)(i), Florida Statutes. I furt	her certify that the information

ofernental innual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am ar the receiver or trustee empoweroof to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in