## 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

DOCUMENT # P94000034998 (2)

PROST DEVELOPMENT LTD., INC.

## FILED Mar 17 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						- 4 10011061 410 1011 01010 80101 00111 01	<b>                                </b>	i 01010 (0115 10	1401 1014 10 <b>9</b> 1
8000 NW 31ST STREET 13831 SW 59TH ST.									
WAREHOUSE 9 STE 101A						DO NOT WRITE IN THIS SPACE			
MIAMI FL 33122 MIAMI FL 33183						3. Date Incorporated or Qualified			
						05/05/1994			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		A	pplied For
21 9010 S.W. 137 AVE 26						65-0493543			lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired			Additional
22 STE.#219 27						Certificate of Status Desired		Fee R	Required
City & State  City & State  City & State  City & State  28						6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip Country Zip			Country			8. This corporation owes or has p	_		
			30			Personal Property Tax due June			∐ No
9. Name and Address of Current Registered Agent					Manaa	10. Name and Address of New R	gistered	Agent	
Wu, <b>Rud</b> y					Name				
9010 S.W. 137TH AVE				82	Street Addre	ss (P.O. Box Number is Not Accepta	ole)		
STE. 219				83					
MIA	MI FL 33186		- 1	ا2					
			ļ	84	City		FL	85 Zip	Code
11. Pursuant I	o the provisions of Sections 607 0502	and 607.1508. Florida Statute	es, the ab	ove	-named corpo	oration submits this statement for the	nurnose o	f changing	its registered
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 Signature, typed or profited name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE									
12. OFFICERS AND DIRECTORS 1				rigio.	in organical radiation	ADDITIONS/CHANGES TO OFFI		DIRECTO	RS IN 12
TITLE	D DELETE 1.1			LE				Change	☐ Addition
NAME	T			ME					;
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NAME			5.2 NA						
STREET ADDRESS					ADDRESS				
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CITY-ST-ZIP TITLE		☐ DELETE	6.1 TIT					Change	☐ Addition
NAME			6.2 NA						1
STREET ADDRESS					ADDRESS				j
CITY, ST. 7IP			6.4 C(1	Y-\$1	t-ZIP				ļ
14. I hereby c	ertify that the information supplied with	this filing does not qualify for	or the exe	mpt	tion stated in S	Section 119.07(3)(i), Florida Statutes.	further co	ertify that th	e information

4. 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 ecceiver of true energy 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 ecceiver of true energy and accurate this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on any puricipal virial an address.

-6-98 (308)-388-4816