

## PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Herris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 173280

1. Corporation Name

City & State

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L. C. MONNIO, INC.					
Principal Place of Business	Mailing Address		Mit MIGIE Gidti Gimit dider minet bmai		
14400 N.W. 102 AVE. MIAMI FL 33016 US	P.O. BOX 5000 HBALEAH FL 33014 US	DO NOT WRITE IN TH	DO NOT WRITE IN THIS SPACE		
		3. Date Incorporated or Qualifed 04/22/1953			
2. Principal Place of Business	2a. Mailing Address	4. FEi Number	Applied For		
21	26	59-0694326	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Cerulcate of Status Desired	\$8.75 Additional -		
22	27				
City & State	City & State	6. Election Campaign Financing	\$5.00 May Be		

City & State

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MIJARES, JULIA J 9995 N.W. 130 ST. HIALEAH GARDENS FL 33016

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Country

9. Name and Address of Current Registered Agent

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	10. Name and Address of New Registered Agent
B1	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
-4	City R5 Zin Code

8. This corporation owes the current year intangible

6. Election Campaign Financing Trust Fund Contribution

**FILED** 

Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90050 012 \*\*\*150.00

Added to Fees

□No

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 Floridar Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with fand agent the obligations of Section 607.0505, Florida Statutes.

Country

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12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   PSS	SIGNATURE	_/ sulle ll	My Hour	· -	and the distribution of the control	}
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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 of on an attachment with an address, with all other like empowered.

SIGNATURE:

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