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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

i. Corporation	MENT # 240896 MIAMI WASHBOWL INC	}						
Principal Place	e of Business	Mailing Address				I .D00130 F1001 01011 00101 1010 10116 0111 0	IBH BIBH BIBH BIBI	I ACOUS BIRAL (BOS
768 NW 3RD STREET 522 SAN ESTEBAN AVENUE MIAMI FL 33128 CORAL GABLES. L 33146								
US		COTINE UNDEED.	Adime publica 6 Adim			DO NOT WRITE IN 1	HIS SPACE	
-	· · · · · · · · · · · · · · · · · · ·					3. Date Incorporated or Qualifed		
	•					11/01/1960		
2. Principal P	lace of Business	2a. Mailing Addr	ess			4. FEI Number		applied For
21	•	26				05-9094533		lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #,	, etc.			5. Certificate of Status Desired		Additional
22	· · ·	27				G. Continoate di Citato Bosilica	Fee F	Required
City & Stat	e	City & State				6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution		I to Fees
Zip	Country	Zip		untry	•	8. This corporation owes the current year		
24	25	29	30	, <u>.</u>		Personal Property Tax.	☐ Yes	□No □
	9. Name and Address of Currer	nt Registered Agent		64	Now-	10. Name and Address of New Registe	rea Agent	
TAL	MAC IOUN			81	Name			Ì
TALAMAS, JOHN				82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
522 SAN ESTEBAN AVENUE						<u> </u>		
CORAL GABLES FL 33146				83				
				84 City			85 Zip	Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, t							FL   S   S	
office or r	egistered agent, or both, in the State im familiar with, and accept the obligation	of Florida. Such chan	ne was authorize	d bv	the corporation	on's board of directors. I hereby accept the a	ppointment as i	registered
	Signature, typed or printed name of registered age				nt signature require	ADDITIONS/CHANGES TO OFFICER		ODE IN 12
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICER	Change	
TITLE	D	Π η	ELETE 1.1 T				L_3 Change	, LJ Addition
NAME	ZABLAH, MARITZA			AME	ļ.			Ì
STREET ADDRESS	522 SAN ESTEBAN AVE		1.3 \$	TREE	T ADDRESS		-	[
CITY-ST-ZIP	CORAL GABLES FL 33146			ITY-S	T-ZIP	- Annual Control of the Control of t	□ Chang	Addition
TITLE	PD	∐ 0	ELETE 2.1 T				Change	- Muniton
NAME	TALAMAS, JOHN		2.2 N					
STREET ADDRESS	522 SAN ESTEBAN AVENUE		2.3 S	TREE	TADDRESS			Į
CITY-ST-ZIP	CORAL GABLES FL				ST-ZIP		[] Change	Addition
TITLE	D	,^ 🔲 D	ELETE 3.1 T				பு Change	, Macinon
NAME	TALAMAS, JULIA		1	AME			•	
STREET ADDRESS	545 ZAMORA AVE.		3.3 S	TREE	TADDRESS			}
CITY-ST-ZIP	MIAMI FL				ST-ZIP	- ·	f"] Change	e 🗀 Addition
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NAME				NAME				
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CITY-ST-ZIP				TY-5	T-ZIP			2 CT Addition
TITLE		□D	DELETE 5.1 T				Change	Addition
NAME	:			IAME	T 40000000			ł
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CITY-ST-ZIP				mr-s	T-ZIP		[] OL	D & delition
TITLE		⊔D	ELETE 6.1 T				Change	Addition
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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, or an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

AYURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-661-8050