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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

1500 N.W. 36TH STREET

2. Principal Place of Business

MIAMI FL 33142



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 381161

(9)

DEL RIO DEVELOPMENT CORP.

(3)

1500 N.W. 36TH STREET

Mailing Address

MIAMI FL 33142

2a. Mailing Address

FILED Feb 05 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

 Date Incorporated or Qualified 04/26/1971

4. FFI Number

27 274	6 S.W. 11th Street	26 2746 S.W.	11 <u>th</u>	Sheet	59-1348205	<u></u>	Not Applicable	
Suite. Apt. #, etc. Sulte, Apt. #, etc.				4.100	39 1340203		75 Additional	
22					5. Certificate of Status Desired	1 1	e Required	
City & State City & State					6. Election Campaign Financing	\$5.	.00 May Be	
23 Miani, Florida 28 Miani, Hou			toilda		Trust Fund Contribution		ded to Fees	
			Country	A trib sorparation of the part the saffern year mangine				
24 33/33 25 Dade 29 33/33 30 L			0 22		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
				Name	10, Italine and Address of New Re	gistered Agent		
CELORIO, JUSTINO								
2746 S.W. 11TH STREET				82 Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33135				83				
]			84	City		FL 85	Zip Code	
44 5	1		No 5		and a series state about and for the		an ita analatawa	
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.								
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE Signature, typed or printed name of registered agent and title it applicable, (NOTE, Registered Agent signature required when reinstating) DATE								
12. OFFICERS AND DIRECTORS 13.				rit signature required	ADDITIONS/CHANGES TO OFFIC		TOBS IN 12	
TITLE	PSTD	DELETE	1,1 TITLE	T	7.0077.0.707.7.7020.7.0.07.7.	☐ Char		
NAME	CELORIO, JUSTINO	-	1,2 NAME				· -	
STREET ADDRESS	2746 S.W. 11TH ST.	1	1.3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL		1.4 CITY-S	· · · · · · · · · · · · · · · · · · ·			1	
TITLE	17117 (17-7)	DELETE	2.1 TITLE	1-41		☐ Char	nge Addition	
NAME		_	2.2 NAME			_	_	
STREET ADDRESS		· ·	2.3 STREET	ADDRESS				
CITY-ST-ZIP			2. 4 CITY - S					
TITLE			3.1 TITLE			Char	nge 🔲 Additlon	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
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NAME		•	4. 2 NAME				f	
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY - S	T- ZIP			1	
TITLE		☐ DELETE	5.1 TITLE			☐ Chan	nge 🔲 Addition	
NAME			5.2 NAME	\				
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-S				ļ	
TITLE		☐ DELETE	6.1 TITLE			☐ Chan	ige Addition	
NAME			6.2 NAME				ļ	
STREET ADDRESS			6.3 STREET	ADDRESS			1	
CITY-ST-ZIP			6.4 CITY-S					
	ertify that the information supplied with	this filing does not qualify for t			ection 119.07(3)(i), Florida Statutes, I	further certify that	the information	

4. I nereby certify that the information supplied with this triling does not quality 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 of 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:

With The Coloris LIRED

CRZEU34 (10/97)

Applied For