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PROFIT CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 513484

1. Corporation Name
MR. WINTER, INC.

(6)

FILED Feb 11 1997 8:00am Secretary of State

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Principal Place of Business Mailing Address						L INDIAL BITOL TITOR (TITAL DIRECTION)	LIMI AINII AIGII I	IIBII BIBII GIBII	I BIEIT INN	
BOBS WEST 26TH COURT HIALEAH FL 33016 HIALEAH FL 33016-2731										
						3. Date incorporated or Qualific 09/10/1976	d or Qualified 3a. Date of Last Report 03/27/1996			
2. Principal Pl	2. Principal Place of Business 2a. Mailing Address					4. FEI Number	, L	TA	pplied For	1
21		26				59-1696560			ot Applicable	
Sulte, Apt.	#, etc.	Suite, Apt.	#, etc.			5. Certificate of Status Desired	ø		Additional	
22		27							equired	-
	City & State Crty & State					6. Election Campaign Financing	ا الحا		May Be	
23 Zin	Country	28	··· ····	Country		Trust Fund Contribution			to Fees	4
_				Journa	у	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No				1
25 29 9. Name and Address of Current Registered Agent				т		10. Name and Address of New				
DITT	MAR & HAUSER, P.A.	—	······································	81	Name					1
	MARY STREET			00	Chart Ar	(D.O. Day N Alai A	4-1-1-3			4
	AND/CONTINENTAL PLAZA, SU	ITE 400		82	Street Ad	dress (P.O. Box Number is Not Accep	table)			
	ONUT GROVE FL 33133			83	1					1
				84	63.			12-1"	ă. I	-
٠				54	City		FL	85 Zip	Code	
agent. I ar	to the provisions of Sections 607.050 agistered agent, or both, in the State of familiar with, and accept the oblig	02 and 607.1508, Flo of Florida Such ch jations of, Section 60	orida Statutes. The ange was author 17.0505, Florida S	e abov ized b Statute	re-named co y the corpor s.	erporation submits this statement for the ration's board of directors. I hereby ac	e purpose o cept the app	changing i ointment as	its registered registered	
SIGNATURE	Signature, typed or printed name of registered ac-	eet and title of applicable	(NOTE forgis	dered Aq	ert sanature ren	puired when roinstating)	DATE			
12.		ND DIRECTORS		3.		ADDITIONS/CHANGES TO OF		DIRECTO	RS IN 12	وَا
TITLE	VP		DELETÉ 1	.t TITLE				Change	Addition	 8
NAME	GONZALEZ, LUIS M.		1	2 NAME						1
STREET ADDRESS	8085 W 28TH CT		1 1	.3 STREET	T ADDRESS					[8
CITY-ST-ZIP	HIALEAH, FL 00000		1	4 City-5	ST-ZIP					S
TITLE	PO		DELETE 3	.1 11111.6				Change	Addition	٦٢
NAME	MIJARES, MANUEL		2	2 NAME						
STREET ADDRESS	8085 WEST 26TH COURT		2	.3 STREET	1 ADDRESS					
CITY-ST-ZIP	HIALEAH FL			4 CITY	S1- ZIP		· · · · · · · · · · · · · · · · · · ·			
TITLE	ST ANIADEO LUICA		DELETE 3	1 TITLE				Change	Addition	}
NAME	MIJARES, LUISA 8085 WEST 26 COURT		F -	.2 NAME						
STREET ADDRESS	HIALEAH FL				1 Address					1
CITY-ST-ZIP	THALEATT IL			4. CITY	ST - 7IP			T 101	7 A 4 400°.	4
TITLE		Ц	1	1 TITLE	}			Change	L Addition	1
NAME				. 2 NAME						
STREET ADDRESS					1 ADDRESS					-
CITY-ST-ZIP		· 	051532	4 CITY - S	S1 - 7IP			Change	Addition	-
MARAC		لــا		A HITLE				L_1 Change	☐ Addition	1
NAME OVERET ADDRESS				.2 NAME	1.400001.00					
STREET ADDRESS					1 ADDRESS					-
CITY-ST-ZIP		- 		4 CITY-S	51 · ZIP			Change	Addition	+
NAME			1	2 NAME				La Crisinge	Augusta	
STREET ADDRESS					FAUDRESS					
CITY-ST-ZIP			1		ì					
	by certify that the information supplie	ed with this filing doe		4 CHY-5 the loxe		ed in Section 119.07(3)(i), Florida Stati	ites I furthe	certify that	the	1
Information	a indianted on this partial remark as	a resultante estal a carrier	t carried the efficiency			at some almost one whealth have the exercise.				. 1

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 eath, 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 on an attachment with an address.

SIGNATURE:

1/10/99