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**

DOCUMENT # F62198 1. Corporation Name

MAY INVESTMENTS, INC.								
Will little title in was					1 1281108 1130 ESSIO 1500 1500 ESBIO 11	AND HOW BEAM ONEN		
Principal Place	of Rusiness	Mailing Address				YERI IBII BIBIF GEBU		ill u f u f 1891
· ·		-200-3-BISCAYNE BLVD						
200 3 BISCATNE BLVD. STE 4000 - STE 4074								
MHAMI FL 30101					DO NOT WRI	ITE IN THIS SF	PACE	
-2U		ـــــالــــ			3. Date Incorporated or Qualifed			
	,				02/09/1982			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		App	lied For
21 1200	Brickell Avenue	26 1200 Brickell Avenue		65-0124761		Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired		\$8.75 Ad		
22 Suite_900		27 Suite 900		5. Certificate of Status Dashed		Fee Req	uired	
City & State	3	City & State			6. Election Campaign Financing	П	\$5.00 N	/lay Be
23 Miami	i, Florida 28 Miami, Flori		ida		Trust Fund Contribution		Added to	Fees
Zip	Country	Zip	Country		8. This corporation owes the cur	rent year Intan	gible	
24 33131	25 USA	29 33131 30	USA		Personal Property Tax.			□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New	Registered Ag	jent	
			81	Name	- 1 • • • • • • • • • • • • • • • • • •		_	
ADAMS, GALLINAR I P. A.				AGTM	Registered Agents Idress (P.O. Box Number is Not Accept	nc		 i
701 BRICKELL AVE			82	1200	Brickell Avenue, Sui	te 900		
STE 2150								
MIAN	/II FL 33131			JMM				
//			84	City Miam i	.	FL	85 Zip Co 33	ode I 3 1
4 2 6	A A S/ - 607 0503	and CO7 1EOR Florido Statutos	the shove	Da bemen-	Exporation submits this statement for the	numose of ch	<u>دود</u> anging its r	egistered
11. Pursuant	to the provisions of Sections 607.0502 i	and 607, 1506, Florida Statutes, FFlorida, Such change was auth	norized by t	he corpora	prporation submits this statement for the ation's board of directors. I hereby acce	pt the appointm	nent as regi	stered
agent. I ai	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	a Statutes.	36-66		
SIGNATUREC	I KLY PRESIDEN	UT, HOIM KEGISI	ereo .	H6AV.	TS, LNC.	426/47	<u></u>	
ļ	Streature, typed or printed name of registered agent a OFFICERS AND			signature requ	uired when reinstating) ADDITIONS/CHANGES TO OF	EICERS AND	DIRECTOR	2S IN 12
12.	-1/	DELETE	13.		ADDITIONS/CHANGES TO OF		Change	Addition
TITLE	PTD	- Occent	1.2 NAME		•	~	_	_
NAME 4	GUTIERREZ, DIONISIO			i	200 Brickell Avenue,	Suito 3	ann	
STREET ADDRESS	200 S. BISCAYNE BOULEVARD.	(#4890)	1.3 STREET	120	izoo Brickell Avende, Mami, Florida 33131	Surte .	.900	
CITY-ST-ZIP	MIAMIFE	(7) +	1.4 CITY-ST	·ZiP F	Tami, Florida 22121		Change	Addition
TITLE	V ,	☐ DELETE	2.1 TITLE				Change	Addition
NAME	GUTIERREZ MAYORGA, ALEJAN		2.2 NAME			<i>2</i> .,		
STREET ADDRESS	TADDRESS 200 S. BISCAYNE BLVD. (#4800)			ADDRESS				
CITY-ST-ZIP	_MIAMI FL				1200 Brickell Avenue	, Suite	900	
TITLE			2. 4 CITY-S	1	1200 Brickell Avenue <u>Miami, Florida 33131</u>	-		
NAME	S	☐ DELETE	2. 4 CFTY-ST 3.1 TITLE	1		-	900 T Change	- Addition
I IN STILL	9	_	_	1		-		Addition
	GUTIERREZ MAYORGA, JUAN J	OSE	3.1 TITLE	T-ZIP=	Miami, Florida 33131		Change	Addition
STREET ADORESS	GUTIERREZ MAYORGA, JUAN J 200 S. BISCAYNE BLVD. (#4800	OSE	3.1 TITLE 3.2 NAME	T-ZIP		, Suite	Change	Addition
STREET ADORESS	GUTIERREZ MAYORGA, JUAN J	OSE	3.1 TITLE 3.2 NAME 3.3 STREET	T-ZIP	Miami, Florida 33131 1200 Brickell Avenue	, Suite	Change	Addition
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14. I hereby certify that the information supplied with this thing 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 deedver of trustee expowered 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 attachmen with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZiP

305 41L 6800

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90181 034 ***150.00