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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # G50953

DE LA FUENTE PARTY RENTAL, INC.

| , | 1 | | | | | | |
|---|---|--|---|---|---|--|----------------------|
| Principal Plac | e of Business | Mailing Address | | 4 | - FIGURAL AND BELLE BUILD INTO BELLE | D FILL ATAIL ASAFS DÍBH AT | D11 01011 01011 1501 |
| | • | DE LA FUENTE. EDUARDO | | | | • | |
| DE LA FUENTA PARTY RENTAL 759 NW 22 AVE | | 759 NW 22 AVE | | | | | |
| MIAMI FL 33126 | | MIAMI FL 33126 | | DO NOT WRITE IN THIS SPACE | | | |
| US | | US | • | | 3. Date incorporated or Qualifed | | |
| | | | | | 07/22/1983 | • | ٠ . |
| 2. Principal P | Place of Business | 2a. Mailing Address | | | 4. FEI Number | 11 | Applied For |
| 21 | | 26 | | | 59-2322978 | | Not Applicable |
| Suite, Apt. | <u> </u> | Suite, Apt. #, etc. | | | | _ \$8.7 | 5 Additional |
| 22 | | 27 | | | 5. Certifcate of Status Desired | Fee | Required |
| City & Stat | te | City & State | | | 6. Election Campaign Financing | \$5.0 | 00 May Be |
| 23 | | 28 | | | Trust Fund Contribution | 1 1 | ed to Fees, |
| Zip | .Country | | Country | ' | 8. This corporation owes the curren | nt year Intangible | 7 |
| 24 | 25 | 29 30 | | | Personal Property Tax. | ŬYes | ØNo |
| 24 | 9. Name and Address of Current | | | | 10. Name and Address of New Re | gistered Agent | |
| | | | 81 | Name | | <u> </u> | |
| DE L | LA FUENTE, EDUARDO | | | | | (-) | |
| 519 | SW 136 PLACE | • | 82 | Street Addre | ess (P.O. Box Number is Not Acceptable | ie) | . |
| MIAN | MI FL 33184 | | 83 | | | 4. po (1. 1 € 2 a 1 | E - 61 - 1-16 - 13 |
| | | • | | | | Car the Bridge | (4) 指数扩展 |
| • | | | 84 | City | | 85 Z | ip Code |
| | | 1007 4500 Flath State 4 | | | | F L | ite registered |
| | | | | | | urpose or changing | its registered |
| 11. Pursuant | to the provisions of Sections 607.0502 registered agent: or both, in the State of | Florida. Such change was authori | ized by | e-named corpo the corporation | n's board of directors. I hereby accept | the appointment as | registered |
| agent. I a | to the provisions of Sections 607.0502 registered agent, or both, in the State of im familiar with, and accept the obligation | Florida Such change was authorions of, Section 607.0505, Florida S | ized by Statutes | the corporation | n's board of directors. I hereby accept | the appointment as | registered |
| 11. Pursuant office or ragent. I a | im familiar with, and accept the obligation | ons of, Section 607.0505, Florida S | statutes | • | | | registered |
| SIGNATURE | m familiar with, and accept the obligation | ons of, Section 607.0505, Florida Stand title if applicable. (NOTE: Regist | tered Agen | e-named corporation the corporation is signature required | when reinstating) | DATE | |
| SIGNATURE | m familiar with, and accept the obligation Signature, typed or printed name of registered agent a OFFICERS AND | ons of, Section 607.0505, Florida S and title if applicable. (NOTE: Regist DIRECTORS | tered Agen | • | when reinstating) ADDITIONS/CHANGES TO OFFICE | DATE CERS AND DIREC | TORS IN 12 |
| SIGNATURE 12. | Signature, typod or printed name of registered agent a OFFICERS AND | ind title if applicable. (NOTE: Regist DIRECTORS DELETE 1 | tered Agen 13. | • | when reinstating) | DATE | TORS IN 12 |
| SIGNATURE 12. TITLE NAME | Signature, typed or printed name of registered agent a OFFICERS AND DPS DE LA FUENTE, EDUARDO | ind title if applicable. (NOTE: Regist DIRECTORS DELETE 1 | tered Agen 13. 1.1 TITLE 1.2 NAME | nt signature required | when reinstating) ADDITIONS/CHANGES TO OFFICE | DATE CERS AND DIREC | TORS IN 12 |
| SIGNATURE 12. | Signature, typed or printed name of registered agent a OFFICERS AND DPS DE LA FUENTE, EDUARDO 519 SW 136 PLACE | ind title if applicable. (NOTE: Regist DIRECTORS DELETE 1 | tered Agen 13. 1.1 TITLE 1.2 NAME | • | when reinstating) ADDITIONS/CHANGES TO OFFICE | DATE CERS AND DIREC | TORS IN 12 |
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CITY-ST-ZIP 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 on an attechment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

FILED

Feb 05, 1999 8:00am

Secretary of State

02-05-1999 90009 017 ***150.00