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Apr 07, 1999 8:00 am
Secretary of State

04-07-1999 90005 034 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **K79430**

1. Corporation Name
CENTURY INVESTORS AND DEVELOPERS, INC.



Principal Place of Business
 2400 S W 137TH COURT
 STE 234
 MIAMI FL 33175
 US

Mailing Address
 2400 S W 137TH COURT
 STE 234
 MIAMI FL 33175
 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/11/1989

4. FEI Number
65-0117614

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business
 21 **2460 SW 137 Ave**
 Suite: Apt: #: etc: **#250**

2a. Mailing Address
 26 **2460 SW 137 Ave**
 Suite: Apt: #: etc: **#250**

22 **#250**

23 **Miami, Florida**

24 **33175** 25 **USA**

27 **#250**

28 **Miami, FL**

29 **33175** 30 **USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROSADO, RAFAEL
 2400 S W 137TH COURT
 SUITE 226
 MIAMI FL 33175

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
2460 SW 137 AVE
 83 **SUITE 250**
 84 City **Miami** FL 85 Zip Code **33175**

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.

SIGNATURE: *Rafael Rosado* **Rafael Rosado** **3-29-99**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	ROSADO, RAFAEL	
STREET ADDRESS	2450 SW 137TH AVE #226	
CITY-ST-ZIP	MIAMI FL	
TITLE	VTDS	<input type="checkbox"/> DELETE
NAME	ROSADO, LEOCADIA E.	
STREET ADDRESS	2450 SW 137TH AVE STE 234	
CITY-ST-ZIP	MIAMI FL	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	ABBO, FREDDY	
STREET ADDRESS	2450 SW 137TH AVE #226	
CITY-ST-ZIP	MIAMI FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	ABBO, EVA	
STREET ADDRESS	2450 SW 137TH AVE #226	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	2460 SW 137 AVE, SUITE 250
1.4 CITY-ST-ZIP	Miami, FL 33175
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	2460 SW 137 AVE, SUITE 250
2.4 CITY-ST-ZIP	Miami, FL 33175
3.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	2460 SW 137 AVE, SUITE 250
3.4 CITY-ST-ZIP	Miami, FL 33175
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 attachment with an address, with all other like empowered.

SIGNATURE: *Rafael Rosado* **Rafael Rosado** **3-29-99** **305-227763**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/198)