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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	MENT # L853 I USED APPLIANCES COI	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
Principal Plac	e of Business	Mailing Address			OLBIŞ BİQIL BIBIL OLBIŞ OLBIŞ BIBIL IŞDI
3111 NW 7 MIAMI FL 3		3111 NW 7 AVE MIAMI FL 33127		DO NOT WRITE IN	THIS SPACE
US		U\$		3. Date Incorporated or Qualified	THIS SPACE
				05/03/1990	
2. Principal F	Place of Business	2a, Mailing Address		4, FEI Number	Applied For
21		26		65-0221455	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #,		Suite, Apt. #, etc.			\$8.75 Additional
22 27		27		5. Certificate of Status Desired	Fee Required
City & Stat	ee Table Tab	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid	the current year Intangible
24	25		30	Personal Property Tax due June 30	
	g. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Regis	tered Agent
	OJAS, CARLOS		81 Name	•	
2880 SW 16TH STREET MIAMI FL 33142		82 Street	Address (P.O. Box Number is Not Acceptable)		
			83		
			84 City		FL 85 Zip Code
SIGNATURE	Signature, barded or printed hardie de registrere.	agent and the it appricable / (NOTE)	98 Hagistered Agont signatur		DATE
12.		AND DÍRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	
TITLE	PD IAS CARLOS	☐ DELETE	1.1 TITLE		Change Addition
NAME OTRET ADDRESS	ROJAS, CARLOS 2880 SW 16 ST		1.2 NAME		
STREET ADDRESS	MIAMI FL 33142		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MINIMITE 00172	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME		weight	2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CITY-ST-ZIP		
TITLE		DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP	·		3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE		□ DELETE	5.1 TITLE		Change Addition
NAME Street address			5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 THILE		Change Addition
NAME	•	_ ···	6.2 NAME		
STREET ADDRESS	,		6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CiTy - ST - 7IP]	

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 suppliemental 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changing or on an altachment with an address.

FILED

Apr 16 1998 8:00am

Secretary of State