## 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 # P93000071257

1. Corporation Name ADENIA CODD

## FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90221 012 \*\*\*150.00

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Principal Place	e of Business	Mailing Address		Linaiten (in ining sitti abitt a	W		
1700 COLLINS	AVE.	1700 COLLINS AVE.			•		
MIAMI BEACH FL 33139 MIAMI BEACH FL 33139			DO NOT WR	DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed		<u> </u>	
•				10/14/1993	•	1	
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Apr	plied For	
21 134		26 C(D		65-0441805	<u> </u>	t Applicable	
Suite, Apt.		Suite, Apt. #, etc.			\$8.75 A		
22	•	Perez, Behar	& Assoc., Inc.	5. Certifcate of Status Desired	Fee Re	quired	
City & State	e . / /		Oth Avenue	6. Election Campaign Financing	\$5.00	May Be	
23 MIL	ami BEACH The	28 N. Miami, FL		Trust Fund Contribution	Added to		
Zip a a	Country	Zip	Country	8. This corporation owes the cur	rrent year Intangible		
24 <b>6</b> 5	134 25	29 30		Personal Property Tax.		□No .	ئ.
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New	Registered Agent	junion or .	
CON	17ALE7 1180 A		81 Name	•		1	
	IZALEZ, LUIS A		82 Street A	ddress (P.O. Box Number is Not Accept	table)		
	COLLINS AVE.				•		
MIAN	MI BEACH FL 33139		83				
			84 City		85 Zip C	Code	
					FL   s   z   s		
						redistered i	
11. Pursuant i	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes, of Florida, Such change was auth	the above-named c	orporation submits this statement for the ation's board of directors. I hereby acce	e purpose of changing its opt the appointment as reg	gistered	
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auth	orized by the corpor	orporation submits this statement for the ation's board of directors. I hereby acce	e purpose of changing its ept the appointment as req	gistered	
office or re agent. I an SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auth tions of, Section 607.0505, Florida	orized by the corpor a Statutes.	ation's board of directors. I hereby acce	ept the appointment as rec	gistered	
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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 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 of 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: