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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000037148 (1)

DE LA O & MARKO, P.A.

Principal Place of Business Mailing Address

FILED Apr 08 1998 8:00am Secretary of State



2 SOUTH BISE MIAMI FL 331:	CAYNE BOULEVARD SUITE 2600 31-1802	2 SOUTH BISCAYNE B MIAMI FL 33131-1802	2 SOUTH BISCAYNE BOULEVARD SUITE 2600 MIAMI FL 33131-1802		DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE	
					05/17/1994		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Ar	oplied For
21		26			65-0492134	No	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5 Codificate of Status Desired \$8.75 Additional		
22		27		5. Certificate of Status Desired	Fee Re	paricpe	
City & State	•	City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28		Trust Fund Contribution	Added 1	to Fees	
Zip	Country	Z ip	Cour	try	8. This corporation owes or has paid the c		
24	25	29	30		Personal Property Tax due June 30. Yes No		
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered	J Agent	
MA	rko, david e		['	Name			
2 SOUTH BISCAYNE BOULEVARD			h h	2 Street Add	dress (P.O. Box Number is Not Acceptable)		
SUITE 2600			L				
MIA	VMI FL 33131-1802		[1	33			
			Ī	34 City	F,	85 Zip (Code
11. Pursuant to office or reagent. I ar	to the provisions of Sections 607.050 egistored agont, or both, in the State m familiar with, and accept the oblig	2 and 607.1508, Florida State of Florida. Such change wa ations of, Section 607.0505,	tutes, the ab is authorized Florida Statu	by the corporates.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap-	of changing it opointment as	s registered registered
SIGNATURE					uired when reinstating)		
	Signature typed or printed name of ingistered ag- OFFICERS AN			Agent signature requ	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ID DIRECTOR	20 IN 12
12.	D OFFICERS AN	DELETE	13.	r 1	ADDITIONS/CHANGES TO OFFICERS AT	Change	Addition
TITLE		CJ Occur	1.2 NA	I			
NAME	MARKO, DAVID E	VADO CHITE SOOS					
STREET ADDRESS	2 SOUTH BISCAYNE BOULE	VAND SUITE ZOUU	- 1	EET ADDRESS			İ
CITY-ST-ZIP	MIAMI FL 33131-1802	DELETE	2.1 TIT	r-ST-ZIP		Change	Addition
TITLE	T.,			1		C Charles	ا العالمات الـــــــــــــــــــــــــــــــــــ
NAME	DE LA O, MIGUEL M	HADD CHITE AGOA	2 2 NAJ				1
STREET ADDRESS	2 SOUTH BISCAYNE BOULE	VARD SUITE 2000		EET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33131-1802	DELETE		Y-S1-ZIP		Change	☐ Addition
TITLE		☐ Derest	3.1 TIT	- 1		Change	
NAME			3.2 NAI				
STREET ADDRESS			1	EET ADDRESS			
CITY-ST-ZIP	·	Delete		Y-ST-ZIP		Chacas	Addition
TITLE		☐ DELETE	4.1 TiTi			☐ Change	LI AUGIRON
NAME			4. 2 NA				,
STREET ADDRESS			4.3 STF	EET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP			<u> </u>
TITLE		☐ DELETE	5.1 T fT	.E		Change	Addition
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 ST	EET ADDRESS			
CITY-ST-ZIP			5.4 CIT	Y+ST-ZIP			
TITLE		☐ DELETE	6.1 TIT	.E		Change	Addition
NAME			6.2 NA	ME			
STREET ADDRESS			6.3 ST	LEET ADDRESS			ļ
CITY-ST-ZIP				Y-ST-ZIP			
+							

Thereby 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.

385-358-2000