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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000075266

1. Corporation Name

HOURET THAILERS CORF.				
Principal Place of Business	Mailing Address		()0041001 118 38(31 DIBIT BATTA BATTA OFFIT OR	iti indal disin itaid ditin diti idal
3907 NW 35TH AVE	3500 SW 127TH AVE			
BAY 16	-BAY 16-			
MIAMI FL - 99142	MIAMI FL 33175		DO NOT WRITE IN TH	IIS SPACE
US	US		3. Date Incorporated or Qualifed 10/13/1994	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 3907 NW 35th Avenue	26 3500 SW 127	th Avenue	65-0536192	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27			Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
Miami, Florida 33142	28 Miami, Flor		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes the current year	Intangible No No Intangible No Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible Intangible In
24 25 25 Current		30	Personal Property Tax. 10. Name and Address of New Registers	
9. Name and Address of Current	r vedisteren wäeut	81 Name	IV. Haille and Address of Hem Negistere	- ragone
CARBALLO, MARIA G				
3500 SW 127TH AVE		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
BAY 16		83		
MIAMI FL 33175		• •		
		84 City	F	85 Zip Code
44 Pursuant to the provisions of Sections 607 0500	2 and 607 1508 Florida Statute	es the above-named co	propration submits this statement for the purpose	
agent. I am familiar with, and accept the obligat	of Florida. Such change was at	uthorized by the corpora	orporation submits this statement for the purpose ation's board of directors. I hereby accept the app	pointment as registered
office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligat SIGNATURE	of Florida. Such change was au lions of, Section 607.0505, Flor	uthorized by the corpora rida Statutes.	ation's board of directors. I hereby accept the app	pointment as registered
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6.4 CITY-ST-ZIP 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 of 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 attactment with an address, with all other like empowered.

SIGNATURE: