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



| PROFIT CORPORATION ANNUAL REPORT 1998   |  | FI  | FLORIDA DEPARTMENT OF STATE  Sandra B. Mortham  Secretary of State  DIVISION OF CORPORATIONS |                      |                                       |              | Apr 21 1998 8:00am<br>Secretary of State  |
|---|--|---|--|----------------------|---------------------------------------|--------------|---|
|   | MENT # P94(<br>on Name<br>NT, INC.           | 0000885   | 99 (3)   |                      |                                       |              |   |
| Principal Plac  | e of Business                                | Mailing A   | ddress   | <del></del>          |                                       |              | I YADALODI ISO 1981 OLOHI BOHI OOKI OOKI OOKI OOKI IDIGA INIO OOKI AANA AANA IDII EBAT                      |
| · · ·   |  |   |  |                      |                                       |              | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified   |
| i   |  |   |  |                      |                                       |              | 11/29/1994  |
| 2. Principal P  | Place of Business                            | 2e. Mailing                                       | g Address  |                      |                                       |              | 4. FEI Number Applied For   |
| Suite, Apt  | # ata  | 26  | Suite, Apt. #, etc.  |                      |                                       |              | 65-0545038   Not Applicable   |
| 22 Suite, Apr.  | #, etc.                                      | <b>├</b>  | 27   |                      |                                       |              | 6. Certificate of Status Desired  |
| City & Stat   | е  | City &  | State  |                      | · · · · · · · · · · · · · · · · · · · |              | 6. Election Campaign Financing \$5.00 May Be  |
| 23  | <del>_</del>                                 | 28  |  |                      | <del></del>                           |              | Trust Fund Contribution Added to Fees   |
| Zip   | Country                                      | Zip   | -  | Cour                 | itry                                  | 1            | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No |
| 24  | 9. Name and Address of C                     | 29 urrent Registered A                            |  | ю]                   |                                       |              | 10. Name and Address of New Registered Agent  |
| FERNANDEZ, MARIO<br>1031 IVES DAIRY RD. #228<br>N. MIAMI BEACH FL 33179   |  |   |  |                      | 81 Name<br>82 Street 6<br>83 City     | Addres       | s (P.O. Box Number is Not Acceptable)  FL 85 Zip Code   |
| 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 register 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 |  |   |  |                      |                                       |              |   |
|   | Signature, typed or printed name of registro | ed agent and title II applicat<br>S AND DIRECTORS | ole. (NOTE: F  | Registered           | Agent signature                       | e required v | when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                  |
| 12.   | D  | S AND DIRECTORS                                   | DELETE   | 1.1 7071             | É                                     | Τ            | Change Addition   |
| NAME  | FERNANDEZ, MARIO                             |   | _  | 1.2 NAN              | AE .                                  |              | •   |
| STREET ADDRESS  | 5720 N PARK RD                               |   |  | 1.3 STA              | EET ADDRESS                           | (            | ĺ   |
| CITY-ST-ZIP   | FT LAUDERDALE FL                             |   | T I nevers   |                      | Y-ST-ZIP                              | <u> </u>     |   |
| TITLE   |  |   | DELETE   | 2.1 TITL             | -                                     |              | ☐ Change ☐ Addition   |
| NAME<br>STREET ADDRESS  |  |   |  | 2.2 NAA              | AE ADDRESS                            | }            |   |
| CITY-ST-ZIP   |  |   |  |                      | Y-ST-ZIP                              |              |   |
| TITLE   | <del></del>                                  |   | DELETE   | 3 1 TITL             |                                       | <del> </del> | Change Addition   |
| NAME  |  |   |  | 3.2 NAA              | AE .                                  | <b>'</b>     |   |
| STREET ADDRESS  |  |   |  |                      | EET ADDRESS                           | 1            |   |
| CITY-ST-ZIP   | <del> </del>                                 | <del></del>                                       | DELETE   |                      | Y-ST-ZIP                              | <del> </del> | Change Addition   |
| TITLE<br>NAME   | ı  |   | bereit   | 4.1 TITL<br>4.2 NAI  | 1                                     | 1            | Change Addition   |
| STREET ADDRESS  |  |   |  | •                    | EET ADDRESS                           | {            |   |
| CITY-ST-ZIP   |  |   |  |                      | 1-ST-ZIP                              |              |   |
| TITLE   |  |   | DELETE   | 5.1 TITL             |                                       | <u> </u>     | Change Addition   |
| NAME  |  |   |  | 5.2 NAM              | AE (                                  | 1            |   |
| STREET ADDRESS  |  |   |  |                      | EET ADORESS                           |              |   |
| CITY-ST-ZIP<br>TITLE  |  |   | DELETE   | 5.4 CITY<br>6.1 TITL | r-ST-ZIP                              | <del> </del> | Change Addition   |
| NAME  |  |   |  | 6.2 NAM              |                                       | <b>!</b>     | Lad Oracingo Land Appointer   |
| STREET ADDRESS  |  |   |  |                      | EET ADDRESS                           | ĺ            |   |
|   | 1  |   |  |                      |                                       | 1            |   |

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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 appliemental 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 professional properties of the corporation or professional properties. The same legal effect as if made under oath; that I am an officer or director of the corporation or professional properties. The same legal effect as if made under oath; that I am an officer or director of the corporation or professional properties. The same legal effect as if made under oath; that I am an officer or director of the corporation or professional properties. The same legal effect as if made under oath; that I am an officer or director of the corporation or professional properties. The same legal effect as if made under oath; that I am an officer or director of the corporation or professional pr

SIGNATURE:

**FILED**