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

P95000016924 (9) **DOCUMENT #**

Principal Plac 6569 W. 22N		Mailing Address 6569 W. 22ND CO						
HIALEAH FL 33016 HIALEAH FL 33016						DO NOT WRITE IN THIS SPACE		
ļ						3. Date Incorporated or Qualified	SPACE	•
						03/01/1995		
2. Principal F	lace of Business	2a. Mailing Addres	<u> </u>			4. FEI Number		Applied For
21	The state of the s	26	•			65-0563463	_ ⊢	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			C.					Additional
22		27				5. Certificate of Status Desired	4	Required
City & Stat	e	City & State				6. Election Campaign Financing	\$5.0	O May Be
23		28				Trust Fund Contribution		d to Fees
Zip	Country	Zip		Country	/	8. This corporation owes or has paid the cur	rent year	Intangible
24	25	29	30			, , , , , , , , , , , , , , , , , , , ,		□ No
	9. Name and Address of Curi	ent Registered Agent				10. Name and Address of New Registered	Agent	
	OTAYO, LAZARO A			81	Name			
6569 W. 22ND COURT				82	Street Ad	Address (P.O. Box Number is Not Acceptable)		
HIALEAH FL 33016				L				
				83				
ļ				84	City		85 Zi	p Code
				"] ",	FL	, [""	p 0000
office or i	to the provisions of Sections 607.0 registered agent, or both, in the Sta m familiar with, and accept the ob	ite of Florida. Such change	was authori	ized b	y the corpo	orporation submits this statement for the purpose of ration's board of directors. I hereby accept the app	changing ointment a	its registered as registered
SIGNATURE						outred when reinstaling) DATE		
12.	Signature, typed or printed name of registrinist agent and title if applicable (NOTE OFFICERS AND DIRECTORS			Registered Agent signature requirements 13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	ORS IN 12
TITLE	PSD DELETE			1.1 TITLE		ADDITIONS/CHANGES TO CITICENS AND	Change	
NAME	COTAYO, LAZARO A			2 NAME				
STREET ADDRESS	6569 W. 22ND COURT				ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33016			4 CITY-S				
TITLE	THE COURT	DELE		4 CHT-3 1 THTLE	51-24		Change	Addition
NAME	ì	_ June		2 NAME	Ì			
STREET ADDRESS					ADORESS			
						• ,		
CITY-ST-ZIP TITLE		DELE		4 CITY-	91- FIL		Change	Addition
NAME	ļ	£_, bitt		2 NAME	1			
STREET ADDRESS	i				T ADDRESS			
CITY-ST-ZIP TITLE		DELE		4. CITY- 1 TIFLE	51-ZIF		Change	e Addition
NAME				2 NAME				hand a reserved to
POTMETE	l .		= 7.	~ INVIVIE	1			

14. 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 roport 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-\$1-ZIP

TITLE

NAME

TITLE

NAME

3AF- 478-4708

Change

Change

Addition

Addition

FILED

Feb 27 1998 8:00am

Secretary of State