

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

FILED
Jun 10, 1999 8:00 am
Secretary of State

06-10-1999 90015 017 ***150.00

PROFIT CORPORATION
 ANNUAL REPORT,
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P95000038693

1. Corporation Name

MIAMI'S BEST DEALS, INC.

Principal Place of Business

Mailing Address

6423 S.W. 107th PL.
 MIAMI, FL 33173

6423 S.W. 107th PL.
 MIAMI, FL 33173

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/16/1995

2. Principal Place of Business

2a. Mailing Address

21 1301 N.W. 89th CT.

26 1301 N.W. 89th CT.

Suite, Apt. #, etc.
 SUITE # 210

Suite, Apt. #, etc.
 SUITE # 210

22 City & State

27 City & State

23 MIAMI, FL.

28 MIAMI, FL.

Zip Country
 33172

Zip Country
 33172

4. FEI Number
 65-0582699

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
 Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

FERNANDEZ, NIEVES M.
 2800 S.W. 110th AVENUE
 MIAMI, FL. 33165

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

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 registered 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 registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D DELETE
 NAME FERNANDEZ, NIEVES M.
 STREET ADDRESS 2800 S.W. 110th AVENUE
 CITY-ST-ZIP MIAMI, FL. 33165

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 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 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, with all other like empowered.

SIGNATURE:

NIEVES M. FERNANDEZ

5/25/99

Date

Daytime Phone #

CR2E034 (11/98)