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

PROFIT
CORPORATION
ANNUAL REPORT
1998
OCUMENT #



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 13 1998 8:00am Secretary of State

	MENT # P9600 EXTILES, INC.	0064086 (7)			1 1 1 1 1 1 1 1 1 1
Principal Place of Business Mailing Address						B D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1850 NW 21ST STREET			Ī		.*	
MIAMI FE 33142					DO NOT WRITE IN	THIS SPACE
					3. Date Incorporated or Qualified	
					07/30/1996	
2. Principal Place of Business 2a. Mailing Addre			77 77 W M M M M M M M M M M M M M M M M		4. FEI Number	Applied For
21 26					65-0683853	Not Applicable
		Suite, Apt #, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
27						Fee Required
 1			ie		6. Election Campaign Financing	\$5.00 May Be
Zip	Country					Added to Fees
24	25] (29]		30	in solporation election the content year intain		
=	9. Name and Address of Currer		1901		10. Name and Address of New Regis	
MA	ALDONADO, BERNARDO JR.		81	Name		
1850 NW 21ST STREET				Ctroot Addr	ess (P.O. Box Number is Not Acceptable)	
MIAMI FL 33142				Street Addit	ess (F.O. Box Number is Not Acceptable)	
			83	• • • • • • • • • • • • • • • • • • • •		
			84	Oa		
				City		FL 85 Zip Code
I Office of t	registered agent, or both, in the State orn familiar with, and accept the oblig Standare, typed or printed name of registered age OFFICERS AN	of Florida, Such change was ations of, Section 607,0505, F ent and tille if applicable (NO	authorized by	the corporati		he appointment as registered
TITLE	P	DELETE	1,1 TITLE		ADDITIONS/CHANGES TO OFFICER	Change Addition
NAME	MALDONADO, BERNARDO 3		1.2 NAME 1.3 STREET ADDRESS			CT change CT Vocation
STREET ADDRESS	1850 NW 21ST STREET	, . ,				
CITY-ST-ZIP	MIAMI FL 33142		1.4 CITY-SI	Į	•	
TITLE		DELETE	2.1 TITLE	- Z F		Change Addition
NAME		_	2.2 NAME			_ sharife _ heariest
STREET ADDRESS			2.3 STREET	ADDRESS		
CITY-ST-ZIP			2. 4 City-ST-ZiP			į
TITLE	DELETE		3.1 TITLE			☐ Change ☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET A	ADDRESS		
DITY-ST-ZIP			3.4. CITY - ST	I - ZIP		
TITLE	DELETE		4.1 TITLE			Change Addition
NAME			4. 2 NAME	Ì		
STREET ADDRESS			4.3 STREET A	ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST	- ZIP		
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5 2 NAME			
STREET ADDRESS			5 3 STREET A	ADDRESS		
CITY-ST-ZIP		DELETE	5 4 City-St	- ZIP		
TITLE		☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET A			
14. Thereby o	certify that the information semplied wi	ith this filing does not qualify t	6.4 CITY-ST		Section 119.07(3)(i). Florida Statutes, I furt	her cortify that the information

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 red-inversor excused 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.

CONTINE. WYLLOVELY VALUE AND TO BERNARDO MALDONADO "

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