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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000087816 (0)

FILED Mar 20 1998 8:00am Secretary of State

STOGI	E'S WHOLESALE, INC.				
Principal Plac	ce of Business	Mailing Address		·	T TORITORI THE SELLO BLUIT DOLLY DOLLY BOILD BOILD TOWN TOWN THAT INDIA
12343 SW 13	IZND COURT	12343 SW 132ND CC	DURT		
MIAMI FL 33		MIAMI FL 33186			DO NOT WRITE IN THIS SPACE
US		US			3. Date Incorporated or Qualified
2. Principal F	Place of Business	2a. Mailing Address		***	10/24/1996 4. FEI Number Applied For
21		26			65-0701995 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			SQ 75 Additional
22		27	7		5. Certificate of Status Desired Fee Required
City & Sta	te	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Countr	у	8. This corporation owes or has paid the current year Intangible
24	25	[29]	30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Currer	nt Registered Agent		T 41	10. Name and Address of New Registered Agent
	IERILAWYER CHARTERED		81	Name	
	3 ALMERIA AVENUE		82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
CC	PRAL GABLES FL 33134				
			83	1	
			84	City	85 Zip Code
44 Durawani	to the provisions of Continue CO7 OF O	10 and C02 4500 Florida O	-1.1-0. 10-0-0-0		FL 50 Expose
office or	registered agent, or both, in the State	e of Florida Such change w	atutes, the abov as authorized b	ve-named co by the corpor	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
agent. I a	im familiar with, and accept the oblig-	ations of, Section 607.0505	i, Florida Statute	98.	
SIGNATURE	Signature, typed or printed name of registered ago	and an additional to the second	APATE Decision of the		guired when reinsteing) DATE
12.	OFFICERS AN		13.	le:ir siğilarıdın rad	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTD	DELETE	1.1 TITLE		Change Addition
NAME	RODRIGUEZ, ELVIS		1,2 NAME		• •
STREET ADDRESS	12343 SW 132ND CT		1.3 STREE	T ADDRESS	
CITY-ST-ZIP	MIAMI FL		1.4 C/TY-	1	
TITLE	SD	DELETE	2.1 TITLE	0. 2.	☐ Change ☐ Addition
NAME	HERRAN, AGUSTIN		2.2 NAME	ļ	· ,
STREET ADDRESS	12343 SW 132ND CT		2.3 ST9FF	T ADDRESS	
CITY-ST-ZIP	MIAMI FL		2 4 CITY-		•
TITLE	VD	X DELETE	3.1 TITLE		Change Addition
NAME	HERNANDEZ, PAUL	•	3.2 NAME		Rodliguez, Elvis
STREET ADDRESS	12343 SW 132ND CT		3.3 STREE	T ADDRESS	243 Sm 132 C+
CITY-ST-ZIP	MIAMI FL		3.4. CITY-		minme fi
TITLE		☐ DELET E	4.1 TITLE		☐ Change ☐ Addition
NAME			4, 2 NAME		†
STREET ADDRESS			4.3 STREE	T ADDRESS	
CITY-ST-ZIP			4.4 CITY -	1	
TITLE		☐ DELETE	5.1 TITLE	51 EII	☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			B	T ADDRESS	
CITY-ST-ZIP			5.4 CITY-		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		- • • • • • • • • • • • • • • • • • • •
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP			6.4 CITY-	1	
	certify that the information supplied w	ith this filing does not quali			in Section 119 07(3Vi). Florida Statutes, I further certify that the information

indicated on this annual report or supplied with this ming does not quality for the exemption stated in Section 1.19.07(5/1). Florida Statutes, indicates, 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.