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

DOCUMENT #

P97000021150 (2)

FILED May 14 1998 8:00am Secretary of State

TM IDI	EAS, CORP.	`	•			
Principal Place of Business Mailing Address						11881 11881 11881 81811 8811 1881
10141 NW 51 LN. 10141 NW 51 LN. MIAMI FL 33178					DO NOT WRITE IN TH	IS SPACE
					3. Date Incorporated or Qualified	
					03/06/1997	
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26	·		× 65-0755018	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required	
City & Stat	0	City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Country		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip		У	8. This corporation owes or has read the	
24	25 9. Name and Address of Curre	nt Registered Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registere	
F 1/		ur nogletelon Affects	8.	Name	10. Hattie alto Addiese of the tregisters	w want
FIGUEROA, CECILIA						
10141 NW 51 LN.			62	Street Add	ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33178			8			-
				<u> </u>		
			84	City	F	85 Zip Code
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.05 egistered agent, or both, in the Stat in familiar with, and accept the oblig	02 and 607.1508, Florida State e of Florida Such change was yations of, Section 607.0505, F	utes, the abore authorized to lorida Statute	ve-named corp by the corpora es.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	
SIGNATIONE	Signature, typed or printed name of registered ag	ent and litle if applicable (NC	DTF Registered A	Pent signature requ	red when reinstating) DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PVD DELETE		1.1 TITLE			Change Addition
NAME	CECILIA FIGUEROA		1.2 NAME			[7]
STREET ADDRESS	10141 NW 51 4	V 2.	1.3 STREE	T ADDRESS		إ
CITY-ST-ZIP	MIAMI, PL 33178		1.4 CITY-	ST-ZIP		
TITLE	P	DELETE	2.1 TITLE			Change Addition
NAME	10141 NW 51 CA	A	2.2 NAME			
STREET ADDRESS	MIAMI, PL 33178	•		T ADDRESS		
CITY-ST-ZIP	711771777	DELETE	2. 4 CITY	-ST - ZIP		Change Addition
TITLE		[_] DECEIE	3.1 TITLE			Criange D Administr
NAME ETREET ADODESS			3.2 NAME	T ADDRESS		
STREET ADDRESS				1		
CITY-ST-ZIP TITLE	DELETE		3.4. CITY 4.1 TITLE	-31-24		Change Addition
NAME			4. 2 NAM	:		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			4.4 CITY-			
TITLE	DELETE		5.1 TITLE	31-ER		Change Addition
NAME			5.2 NAME			. —
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			5.4 CITY-	ļ		
TITLE		DELETE	6.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS		
CITY-ST-ZIP			6.4 CITY-	ST-ZIP		
	certify that the information supplied v	with this filing does not qualify			Section 119 07(3)(i). Florida Statutes, Lifurther	certify 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 supplimental annual report is frue 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 of 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.

OLONIATURE.

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4/22/98

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