돌ILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 04, 1999 8:00 am PROFIT FLORIDA DEPARTMENT OF STATE Secretary of State CORPORATION Sandra B. Moltham 🛰 ANNUAL REPORT Secretary of State 05-04-1999 90068 010 ***150.00 DIVISION OF COMPORATIONS 1998 P98000025963 DOCUMENT # 478147 - 90000 - +~ . MITBRY CORPORATION Principal Place of Business Mailing Address DO NOT WRITE IN THIS SPACE 157 DRENNED ROAD, ORLANDO, FL 32806 3. Date Incorporated or Qualified March 18, 1998 4. FEL Number 59-3502856 2. Principal Place of Business 2a. Mailing Address Applied For 26 Not Applicable 21 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 22 City & State ~ City & State \$5.00-May:Bo= Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees, -- Countrv 8. This corporation owes or has paid the current year Intangible ☐ Yes 30 Personal Property Tax due June 30. 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Alberto B. Ruiz 82 Street Address (P.O. Box Number is Not Acceptable) 3081 Bloomsbury Drive₩ Kissimmee, Florida City 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. agent and title if applicable (NOTE Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13 DELETE Change K Addition 1.1 TITLE p,v,s,t TITLE Alberto B. Ruiz NAME 1.2 NAME 3081 Bloomsbury Drive STREET ADDRESS 1 3 STREET ADDRESS 1 4 CITY-ST-ZIP Kissimmee, Florida 34747 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4. CITY - ST - ZIP DELETE - Change Addition 3 1 TITLE .3.3 STREET_ADDRESS STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP Change Addition DELETE. TITLE 4.1 TITLE 4 2 NAME NAME 4 3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE Addition TITLE 5.1 TITLE NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 City - ST - 7IP CITY-ST-ZIP ☐ Change Addition DELETE TITLE 62 NAME NAME 6 3 STREET ADDRESS 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. ALBERTO RUIZ SIGNATURE: