.ST IS \$550.00 ·

CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P98000082814

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90015 010 \*\*\*150.00

| Principal Place<br>8855 S.W. 27TI<br>MIAMI FL 3316  | H STREET<br>5<br>Jace of Business  | Mailing Address 8855 S.W. 27TH STREET MIAMI FL 33165  2a. Mailing Address 26 Suite, Apl. #, etc. |  |   | 3. Date Incorporated or Qualife 09/24/1998 4. FEI Number      | RITE IN THIS :       | SPACE .            | plied For<br>1 Applicable |
|---|--|--|--|---|---|----------------------|--------------------|---------------------------|
| City & State  | 6  | City & State   |  | <del></del> -   | Certificate of Status Desired     Election Campaign Financing |                      | \$5.00             |                           |
| Zip   | Country  | Zip  | Cour   | ntry  | 8. This corporation owes the currently Personal Property-Tax. | irrent year Inta     | Added to           |                           |
| 24  | 25   | <u> </u>   | 30   |   | 10. Name and Address of New                                   |                      |                    |                           |
| 9. Name and Address of Current Registered Agent CURBELO, ROBERT JR 8855 S.W. 27TH STREET MIAMI FL 33165 |  |  |  | 81 Name<br>82 Street Add  | iress (P.O. Box Number is Not Acce                            |                      | Hour               |                           |
|   | to the provisions of Sections 607.050<br>egistered agent, or both, in the State<br>in familier with, and accept the obliga |  | - 1  | 84 City   |   | FL                   | 85 Zip C           |                           |
| SIGNATURE 12. TITLE NAME  | Signature, typed or printed name of registered ages OFFICERS AN D CURBELO, ROBERT JR.                                      | nt and trie d'applicable. (NOTE: ID DIRECTORS  DELETE  | 13.<br>1,1 T/II<br>1,2 NA  | 1   | nd when reinstating) ADDITIONS/CHANGES TO C                   | DATE<br>OFFICERS AND | DIRECTOI<br>Change | RS IN 12  Addition        |
| STREET ADDRESS<br>CMY-ST-ZIP  | 8855 S.W. 27TH STREET<br>MIAMI FL 33165  |  | 1,4 CIT  | REET ADDRESS<br>TY-ST-ZIP   |   | <del>.</del>         | Change             | }                         |
| NAME<br>STREET ADDRESS  | D<br>Fernandez, Osvaldo<br>8855 S.W. 27th Street   | ☐ DELETE   | 2.1 TIT  | 1   |   |                      | Charle             | ☐ Addition                |
| CITY-ST-ZIP   | MIAMIEL SSIES  |  |  | DEET ATYOPESS   | N. B. TON   |                      | -                  | Addition                  |
| NAME<br>STREET ADORESS  | MIAMI FL 33165   | ☐ DELETE   | 2.4 CT<br>3.1 TTT<br>3.2 NA  | DEET ATYOPESS   | DIMECTOR<br>SUSE AUSTA<br>8855 SW 27 ST                       |                      | Change             | ☐ Addition                |
| STREET ADORESS CITY-ST-ZIP TITLE NAME   | MIAMI FL 33165   | ☐ DELETE   | 2.4 CT<br>3.1 TTT<br>3.2 NAI<br>3.3 STT<br>3.4. CT<br>4.1 TTT<br>4.2 NA                      | REET ADORESS ITY-ST-ZIP INF INF INF INF INF INF ITY-ST-ZIP INF                        |   | 33165                | ☐ Change           | . Pagainois               |
| STREET ADORESS<br>CITY-ST-ZIP<br>TITLE  | MIAMI FL 33165   |  | 2.4 CT<br>3.1 TM<br>3.2 NA/<br>3.3 STF<br>3.4 CT<br>4.1 TM<br>4.2 NA/<br>4.3 STF             | REET ADDRESS ITY-ST-ZIP LE WAE REET ADDRESS ITY-ST-ZIP LE REET ADDRESS TY-ST-ZIP LE                                       | DINECTOR  SUSE A COSTA  8855 SW 27 ST  MIAMI #1 :             | 33165                | <u>.</u>           | Addition                  |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE                                  |  | - DELETE   | 2.4 CIT<br>3.1 TM<br>3.2 NA<br>3.3 STT<br>3.4. CIT<br>4.2 NA<br>4.3 STT<br>5.2 NA<br>5.3 STT | REET ADDRESS ITY-ST-ZIP THE MAE REET ADDRESS ITY-ST-ZIP THE MAE REET ADDRESS TY-ST-ZIP THE MAE REET ADDRESS TY-ST-ZIP THE | DIMECTOR<br>SOSE ACOSTA<br>8855 SW 27 ST<br>MIAMI #1          |                      | Change             | Addition                  |

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 507, 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.

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