## 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

YOU IMENIT #

F	ILED	
May 21	1998	8:00am
Secreta	ary of	State

1. Corporation		WIDE INC.	J <b>2</b> 8	(5)			
Principal Plac	ce of Busines	s	Mailing Add	dress			ı idali andğı sısıs alası daks sısıs salı alası siğis gibli aldır algış alaşı (00)
1940 N.W.				. 82ND AVE.			
MIAMIFLS US	33120-1012		MIAMI FI US	. 33126-1012			DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
	<del> ,</del> , ,				· <del></del>		02/13/1992
2. Principal F	Place of Busin	ness	}-¬	2a. Mailing Address			4. FEI Number Applied For Not Applied For Not Applied For
Suite, Apt.	#, etc.		[26]Suite. A	pt.#, etc.			SR 75 Additional
22	<u> </u>		27]				5. Certificate of Status Desired Fee Required
City & Stat	te		City & S	late			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip		Country	Zip		Country		8. This corporation owes or has paid the current year Intangible
24		25	29]		30		Personal Property Tax due June 30. 📝 Yes 🔲 No
			urrent Registered Ag	ent	81	Name	10. Name and Address of New Registered Agent
	30MEZ, MA 10815 S.W.						/D O D THE STATE OF THE STATE O
	VIAMI FL 33				82	Street Ad	Address (P.O. Box Number is Not Acceptable)
•					83		
					84	City	85 Zip Code
14 5			707.00	Fig. 54 Oct.		•	corporation submits this statement for the purpose of changing its registered
office or agent. I a	r <b>egis</b> tered ag am <b>fa</b> miliar wi	ent, or both, in the S th, and accept the c	State of Florida, Such obligations of, Section	change was a 607.0505, Flo	uthorized by orida Statutes	the corpo s.	oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	<del></del>		ed againt and little if applicabile	/AIGNT	. Dogist too		required whon reinstating) DATE
12.	Signature, typeo		S AND DIRECTORS	(1467)	13.	nt signature rec	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DPT		]	DELETE	1.1 TITLE		Change Addition
NAME		Z, MARIO			1.2 NAME		
STREET ADDRESS	3	SW 136TH CT.			1.3 STREET	- 1	
CITY-ST-ZIP	MIAMI VPS	<u>FL</u>		DELETE	1,4 C(TY - S' 2,1 T(TLE	T - ZIP	Change Addition
TITLE Name		Z, MARIA S.	ι	-1 DEFET	2.1 TITLE 2.2 NAME		T Change C Mannon
STREET ADDRESS		SW 136TH CT			2.2 NAME 2.3 STREET	ATIDRESS	
City-St-ZiP	MIAMI				2. 4 CITY - S		
TITLE	S			DELETE	3.1 TITLE		Change Addition
NAME		EZ, MARIA S			3.2 NAME		
STREET ADDRESS		SW 136TH CT.			3.3 STREET	ADDRESS	
CITY-ST-ZIP	MIAMI	<u>FL</u>	<del>-</del>	TOCICTE	3.4. CITY - S	I-ZIP	Change Addition
TITLE			L	DELETE	4.1 TITLE 4. 2 NAME	1	Li Change Lii Addillon
NAME Street Address					4. 2 NAME 4.3 STREET	ADDRESS	
CITY+ST-ZIP					4.4 CITY - S		
TITLE				DELETE	51 TITLE		Change Addition
NAME					5.2 NAME		
STREET ADDRESS					5.3 STREET	ADDRESS	
City-St-ZIP			,		5.4 CITY - S	T-71P	
TITLE				DELETE	6.1 1!TLF		Change Addition
NAME				100	6.2 NAME	1	
STREET ADDRESS	l				63 STREFT	ADDRESS	
CITY-ST-ZIP	1				6.4 GITY-S		

Thereby carrier information explains with this time does not quality or the exemption stated in Section 119.07(3)(i), Florida Statules. 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 of the econet or trasfee empowered to execute this report as required by Chapter 607, Florida Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

**SIGNATURE:**