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 #

S60138

(2)

290 H/	ARBOR DRIVE CORPORA	ATION					DIANI ANDER ANDR	
Principal Plac	e of Business	Mailing Addres						
1		· ·						
	CORPORATION ST SUITE 200 178	8750 NW 36 S	% SUTERRA CORPORATION 8750 NW 36 ST SUITE 200 MIAMI FL 33178			DO NOT WRITE IN THIS SPACE		
US		US				3. Date Incorporated or Qualified		
						06/06/1991		
⊢	Place of Business	2a. Mailing Add	iress			4. FEI Number	—	plied For
21 Cuita Ant	# ato	26 Cuite Ant	Suite, Apt. #, etc.			65-0302258		t Applicable
Suite, Apt. #, etc.		27	27			5. Certificate of Status Desired	\$8.75 A	quired
City & State		City & State				6. Election Campaign Financing	\$5.00	
Zip	Country	28 Zip		Country		Trust Fund Contribution	Added to	
24	├ ──┐ '	<u></u>	30	Country		8. This corporation owes or has paid the curr		angible] No
24]	9. Name and Address of Cu	29 urrent Registered Agent				Personal Property Tax due June 30.		1 140
DE				81	Name	to, table glad position of flow (legislation)	90111	
	EL VALLE, MILLY SUTERRA CORPORATION							
	50 NW 36 ST SUITE 200			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
1	AMI FL 33178			83				
				84	City	FL	85 Zip C	Sode
11. Pursuant	to the provisions of Sections 607	7 0502 and 607 1508 Flor	rida Statutas th	e above	-named corne		changing its	s registered
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.								
	im familiar with, and accept the c	obligations of, Section but	7.0505, Fiorida s	Statutes				
SIGNATURE	Signature, typed or printed name of registers	ed agent and title if applicable	tNOTE: Regin	stered Ager	nt signature require	ed when reinstating) DATE		
12.		S AND DIRECTORS		13,		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 12
TITLE	VTS	ו 🔲 נ	DELETE 1	1.1 TITLE			Change	Addition
NAME	DEL VALLE, MILLY		1 1	I.2 NAME				
STREET ADDRESS	8750 NW 36 ST STE 200)	1	1.3 STREET /	ADDRESS			
CITY-ST-ZIP	MIAMI FL		1	I.4 CITY - ST	- 21P			
TITLE		D r	DELETE 2	2.1 TITLE			Change	Addition Addition
NAME			2	2.2 NAME	İ			ĺ
Street Address			2	2.3 STREET /	ADDRESS			
CITY-ST-ZIP				2. 4 CITY - ST	T-ZIP			
TITLE		· L.		3.1 TITLE			Change	Addition
NAME				3.2 NAME	}			}
STREET ADDRESS				3.3 STREET A				
CITY-ST-ZIP				3.4. CITY - ST	r- ZIP		Change	Addition
TITLE				I.1 TITLE		'	Change	Addition
NAME OTREET ARCHEOG				I. 2 NAME	100000			J
STREET ADDRESS				1.3 STREET A				ļ
CITY-ST-ZIP TITLE		Пг		14 CITY-ST 5.1 TITLE	- ZIP		Change	Addition
NAME		ب ت		2 NAME		•		
				3 STREET A	INDBESS			
STREET ADORESS CITY-ST-ZIP				i.4 City-st				ľ
TITLE		Πε		1.4 CITTLE	- 6.91		Change	Addition
NAME				2 NAME	1	•		
STREET ADDRESS				3.3 STREET A	ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST				

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 challged, or on an attachment with an address.

SIGNATURE:

3655425999

FILED

Mar 25 1998 8:00am

Secretary of State