FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED								
Apr 07 1998 8:00an	n							
Secretary of State								

	MENT # DEVELOP)	(6)		-		
Principal Plac	e of Business		Ma	ailing Address				
881 OCEAN DRIVE APT. 19F 881 OCEAN DRIVE APT. 1								
KEY BISCAY	KEY BISCAYNE FL 33149 K			KEY BISCAYNE FL 33149				DO NOT WRITE IN THIS SPACE
								3. Date Incorporated or Qualified
2 Principal D	Nace of Pusing		1 24	Mailing Address				12/01/1978 4. FEt Number Applied For
21	2. Principal Place of Business 2a. Mailing / 21							4. FEI Number Applied For Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22			27					ree Required
City & State	е		28	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip		Country	1201	Zıp	С	ountry	,	8. This corporation owes or has paid the current year Intangible
24	25		29		30			Personal Property Tax due June 30. Yes No
		nd Address of Current	Regist	lered Agent		81	Name	10. Name and Address of New Registered Agent
	iazoza, car 1 madeira	LOS CPA						
	i madeira Oral Gables	EI 33134				82	Street	t Address (P.O. Box Number is Not Acceptable)
	HAP OUDER	712 00104				83		
						84	City	85 Zip Code
			··				,	FL
	to t ne provision registered agen im familiar with,	is of Sections 607,0502 it, or both, in the State c , and accept the obligat	and bu of Floric ions of	77.1508, Florida Statu fa. Such change was , Section 607.0505, F	utes, the s authoriz Florida St	apove zed by tatutes	e-named / the cor s.	d corporation submits this statement for the purpose of changing its registered rporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or	printed hame of registered again	and title	∢applicable (NC	OTE: Registe	red Age	ent signature	re required when reinstating) DATE
12.		OFFICERS AND	DIREC		13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	CESAR H.		☐ DELETE		TITLE		Change Addition
NAME STREET ADDRESS		MOHEDANO #114				NAME	ADDRESS	
CITY-ST-ZIP		, VENEZUELA			1	CITY-S		
TITLE	STD			☐ DELETE		TITLE	1 211	☐ Change ☐ Addition
NAME	anzola,				2.2	NAME		
STREET ADDRESS		MOHEDANO #114			2.3	STREET	ADDRESS	
CITY-ST-ZIP	CARACAS	, VENEZUELA		DELETE:		CITY-S	T-ZIP	
TITLE NAME				☐ DELETE		TITLE NAME		Change Addition
STREET ADDRESS							address	
CITY-ST-ZIP						3.4. CITY - S1 - 2		
TITLE				DELETE		4.1 TITLE		☐ Change ☐ Addition
NAME						NAME		
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP TITLE		······································		DELETE		CITY-S'	T-ZIP	Change Addition
NAME :				OLIC IL	1	NAME		Change C Accumul
STREET ADDRESS							ADDRESS	
CITY+ST-ZIP						CHY-S		
TITLE				☐ DELETE	- 1	THLE		Change Addition
NAME						NAME		
STREET ADDRESS							ADDRESS	
14. I hereby c	ertify that the in	nformation supplied with	n this fil	ling does not qualify t	for the e	CHY-SI xempt	ion state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information
Indicated of officer or o	on this annual i director of the d	report or supplemental a	annual /er or tr	report is true and ac rustee empowered to	curate a	nd tha	at my sig	gnature shall have the same legal effect as if made under oath; that I am an s required by Chapter 607, Florida Statutes; and that my name appears in

(ceser Ancole D)