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 #
1. Corporation Name

S16452

(2)

EDUARDO'S, INC.

rincipal Place	of Business	Mailing Ad

FILED Apr 16 1998 8:00am Secretary of State



Date also al Disco	-10				
Principal Plac		Mailing Address			
2400 E. LAS OLAS BLVD. 2400 E. LAS OLAS BLVD. FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33301					
		FI. EAUDERDALE FL 3330	n.	DO NOT WRITE IN TI	HIS SPACE
				3. Date Incorporated or Qualified	
				12/03/1990	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26 24 TIESTO	4 WAY	65-0233744	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28 (. 4700)		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25		30]	Personal Property Tax due June 30.	Yes No
	9, Name and Address of Currer	it Hegistered Agent	81 Name	10. Name and Address of New Registe	red Agent
	DLOSIMO, JAMES J.		Of Ivallie		
	FIESTA WAY		82 Street Address (P.O. Box Number is Not Acceptable)		· · · · · · · · · · · · · · · · · · ·
ri	LAUDERDALE FL 33301		83		
					16-11 # 6-2
į			84 City		EL 85 Zip Code
agent I a SIGNATURE	im familiar with, and accept the oblig	entions of, Section 607.0505, Flori	inorized by the corporal ida Statutes. Registered Agent signature requi		TE.
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	DELETE	1.1 TITLE	2	Change Addition
NAME	COLOSIMO, JAMES		1.2 NAME	JAMES COLOGINO /AU	
STREET ADDRESS	2400 E. LAS OLAS BLVD.		1.3 STREET ADDRESS	BY FIETER WAY T	7 3000 1111
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY - ST - ZIP	FT. LAUDYNDAUF T	C 33301-1411
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2 2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		Priese	2. 4 City-St-2IP		1 Ac 1 1489
TITLE		DELETE	31 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP TITLE		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME		L piccic	4.1 ITILE 4. 2 NAME		
STREET ADDRESS			4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.3 STREET AUDRESS		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CiTY-ST-ZiP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME		—	6.2 NAME		
STREET ADORESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			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 em an officer or director of the coveration 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 obtanged or on an attachment with an address.