## 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 # P94000062721 (3)

RESALES, INC.

**FILED** May 05 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address			1 100 (100 ) 110 1200 2000 2000 2010 2010 2010
12350 SW 132ND COURT     12350 SW 132ND COURT       STE #215     STE #215       MIAMI FL 33186     MIAMI FL 33186					DO NOT WRITE IN THIS SPACE
MIAMI PL 33186 US US			3. Date Incorporated or Qualified		
•		•			08/25/1994
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number Applied For
21 13370 SIN 131 ST 26 10930 SW 48 ST				65-0515609 Not Applicable	
(Sulte Apt.		Apt. #, etc.		٠	\$8.75 Additional
22 10 City & State		27			Fee Required
23 MIA	mi, FL	<del></del>	FL		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	70	Cou		8. This corporation owes or has paid the current year Intangible
24 3318		29 33165	30 4	15 A	Personal Property Tax due June 30.  Yes No
	Name and Address of Current	Registered Agent		nel Mana	10. Name and Address of New Registered Agent
GOI	n <b>sa</b> lves, douglas v			B1 -Name	oglas V. Gonsalves
132					Address (P.O. Box Number is Not Acceptable)
STE #215					930 SW 48 ST
MIA	MI FL 33186			83	
			ŀ	84 City	85 Zip Çode
				84 C 1	14Mi FL  85   Zip Code   33/65
office or re	to the provisions of Sections 607,0502 egistered agent, or both, in the State or familiar with, and accept the obligat	of Florida, Such change was	authorized	by the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of regulered agen				4-25-98  e required when reinstaling)  DATE
12.	OFFICERS AND		13.	Agent organists	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 10	ı F	PD Change Addition
NAME	GONSALVES, DOUGLAS V		1.2 NA		
STREET ADDRESS	12350 SW 132ND CT, #215			REET ADDRESS	10930 SW 48 ST
CITY-ST-ZIP	MIAMI FL			Y-ST-ZIP	mi Ami FL 33165
TITLE	D	DELETE	2.1 TIT		V D
NAME	BOWERS, ANDREW H		2.2 NA	I	
STREET ADDRESS	12350 SW 132ND CT, #215			REET ADDRESS	13600 SW 73 AVE
	MIAMI FL				MIAMI FL 33158
CITY-ST-ZIP	MINNI FL	DELETE	2. 4 CI 3.1 TIT	TY-ST-ZIP	The same of the sa
NAME			3.2 NA		14985 SW 108 TERR
STREET ADDRESS				reet address	MIAMI FI 33196
CITY-ST-ZIP		DELETE		IY-ST-ZIP	.
TITLE		☐ DELETE	4.1 TiT		Change L Addition
NAME			4. 2 N/		
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP		T or ere		Y-ST-ZIP	
TITLE		DELETE	5.1 TIT		Change Addition
NAME			5.2 NA		
STREET ADDRESS			5.3 STI	REET ADDRESS	
CITY-ST-ZIP				Y-ST-ZIP	
TITLE		☐ DELETE	6.1 TIT	1	Change Addition
NAME			6.2 NA	ME	
STREET ADDRESS			6.3 STI	REET ADDRESS	
CITY-ST-ZIP			6.4 CIT	Y-S1-ZIP	
14. I hereby o	ertily that the information supplied wit	this filing does not qualify facuual report is true and ac	for the exe	mption state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information

indicated on this arriugh report of supplemental arriugh report is rule and accurate and that my signature shall have the same regal effect as it made under oath; that I am a 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 changed, of you an altagrament with an address.