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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 30, 1999 8:00 am Secretary of State 03-30-1999 90050 050 ***150.00

| DOCUI | MENT # 609387 | | | | | | |
|---|--|---|--------------------|--|--|-----------------------|------------------|
| · · · · · | TERPRISES, INC. | | | | | | |
| | | | | | | 24 | |
| Principal Place | e of Business | Mailing Address | | • • | T 108/10 Exit) OUTIN IDION FILMS ABILL AND A DION | , Bibli Bibli Bibli 1 | .1011 01011 4001 |
| C/O LERMAN 8 | B LERMAN P.A | C/O LERMAN & LERMAN P. | A | | | | |
| 48 E FLAGLER ST PH-101 48 E FLAGLER ST PH-101 | | | | | DO NOT WOITE IN THE | C CDACE | |
| MIAMI FL 3313 | 1-1012 | MIAMI FL 33131-1012 | | | DO NOT WRITE IN THI | S SPACE | |
| | | | | | 3. Date Incorporated or Qualifed | | |
| | | To Maritime Address | | | 02/09/1979 4. FEI Number | I An | plied For |
| 2. Principal P | Principal Place of Business 2a, Mailing Address | | | | | | t Applicable |
| 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. | | Suite Ant # etc | 7- W1 | | 59-1916426 | \$8.75 A | |
| Suite, Apt. | #, 6to. | 27 | 11te, Apt. #, 6tc. | | 5. Certifcate of Status Desired | Fee Re | |
| City_&_State | Burn and the second | City,& State | | 6: Election Campaign Financing | \$5:00° | May Be | |
| 2 | | 28 | | Trust Fund Contribution Added to Fees | | | |
| Zip | Country | Zip Country | | 8. This corporation owes the current year Intangible | | | |
| , A | 25 | 29 30 | 0 | | Personal Property Tax. | | |
| | 9. Name and Address of Current | Registered Agent | <u> </u> | | 10. Name and Address of New Registere | d Agent | |
| | | | 81 | Name | , | / | 1 |
| | , NATAN ROBERTO | | 82 | 2 Street Addr | reet Address (P.O. Box Number is Not Acceptable) | | |
| 48 E | • | OZ Street Address (F.O. I | | , | | | |
| MIAN | VII FL 33131 | | 83 | 3 | | - | |
| | 4 | | 84 | 6 City | | . 85 Zip C | Code |
| | | | | 1 | F | L. | |
| office or r | egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agent | of Florida, Such change was autrions of, Section 607.0505, Florid | a Statute | v the corporation | oration submits this statement for the purpose on's board of directors. I heraby accept the app | omunent as reç | |
| 12. | OFFICERS AN | | 13. | | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO | RS IN 12 |
| TITLE | PD | ☐ DELETE | | | | ☐ Change | ☐ Addition |
| NAME | ROK, NATAN ROBERTO | 1.23 | | : | | | |
| STREET ADDRESS | 48 E. FLAGLER ST. PH-105 | 05 1.3 | | ET ADDRESS | | • | |
| CITY-ST-ZIP | MIAMI FL 33131 | | | ST-ZIP | | | |
| TITLE | VP | DELETE 2.11 | | | | ☐ Change | Addition |
| NAME | ROK, SERGIO | SERGIO 22 | | | | • | |
| STREET ADDRESS | · · · · · · · · · · · · · · · · · · · | | 2.3 STREE | ET ADDRESS | | | ļ |
| CITY-ST-ZIP | MIAMI FL 33131 | | 2. 4 CITY- | ST-ZIP | | | |
| TITLE | | DELETE 3.1 | | | ن المنظم الم | Change | ☐ Addition |
| NAME | 3.21 | | 3.2 NAME | : | | | ļ |
| STREET ADDRESS | | | 3.3 STREE | ET ADDRESS | • | | |
| CITY-ST-ZIP | | | 3.4. CITY- | | | ☐ Change | Addition |
| TITLE | _ | | 4.1 TITLE | | | ☐ Criange | |
| NAME | • | | 4. 2 NAME | | • | | |
| STREET ADDRESS | | | | ET ADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CITY- | | - Anna - | ☐ Change | Addition |
| TITLE | | ☐ DELETE 5.11 5.24 | | I | | • | |
| NAME | . , | | | | | ٠. | 1 |
| STREET ADDRESS | TC00 | | 5.3 STRE | ET ADDRESS | | , | Ì |
| CITY-ST-ZIP | | | 5.4 CITY- | | | ☐ Change | Addition |
| TITLE | | | 62 NAME | i | · | | |
| NAME | | • | | ET ADDRESS | | • | |
| STREET ADDRESS | | | 6.4 CITY- | | | | |
| CDV CT 7ID | | | = U.7 UII 1- | V . C. I | | | |

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 of 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 grangery, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #