PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT # 188180



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90001 014 ***150.00

BLACKW	VELL MAI	ntenance C	ORPORAT	TON							
Principal Plac	e of Busines	s	N	Mailing Addres	ss						II 81831 DIBII 1881
2450 SW 137 AVE C/O MARICA B. CABALLERO STE 221 2450 S.W. 137TH AVENUE S							l		DO NOT WRITE IN THE	IS SDACE	
MIAMI FL 33175 MIAMI FL 33175									DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
U\$ US									,		
2. Principal Place of Business 2a. Mailing Address									10/03/1955 4. FEI Number		Applied For
-	—	2a. Mailing Address					59-0916605		Not Applicable		
21 Suite, Apt. #, etc.				Suite, Apt. #, etc.							Additional
221				27					5. Certifcate of Status Desired		Required
City & State				City & State				~~~	6Election Campaign Financing	\$5.0	0 May Be
23				28					Trust Fund Contribution Added to Fees		
Zip Country				Zip Cou			ıtry		8. This corporation owes the current year Intangible		
24		25	29			30			Personal Property Tax.	Z Yes	□No
	g, Name	and Address of	Current Regi	stered Agen	t				10. Name and Address of New Registere	d Agent	
				•			81	Name			
DE \			82 Street Add			ess (P.O. Box Number is Not Acceptable)					
530 NW 54 ST MIAMI FL 33127							-=				
MIAI	MI FL 3312	i.					83				
						ŀ	84	City	F	85 Zi	p Code
									oration submits this statement for the purpose		its registered
office or i	registered ag am familiar w	gent, or both, in the vith, and accept the	e State of Flor obligations o	rida. Such cha of, Section 60	ange was a 7.0505, Flo	utnorized rida Statu	tes.	tne corporation.	on's board of directors. I hereby accept the app	ointment as	registered
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re OFFICERS AND DIRECTORS					13.	- igizir	. organization to quant	ADDITIONS/CHANGES TO OFFICERS A	AND DIREC	TORS IN 12
TITLE	PTD	0			DELETE	1.1 1111	LE		7.22	Chang	
NAME	1	NA, FRANK				1.2 NA	ME				
STREET ADDRESS		85TH COURT				1.3 STF	REET	ADDRESS	•		ł
CITY-ST-ZIP	MIAMI FL					1.4 CIT	Y-S1	T-ZIP			
TITLE	VS				DELETE	2.1 TIT	LE.			Chang	je 🗌 Addition
NAME)na, frank				2.2 NA	ME				
STREET ADDRESS		85TH COURT				2.3 STI	REET	ADDRESS			
CITY-ST-ZIP	MIAMI FL					2. 4 Cf	Y-S	T-ZIP			
TIŢLE					DELETE	3.1 TIT	LÉ			Chang	je 🗌 Addition
NAME						3.2 NA	ME				
STREET ADDRESS	3					3.3 ST	REET	TADORESS			
CITY-ST-ZIP		· · · · · ·				3.4. CF		T-ZIP			T A Julio
TITLE					DELETE	4.1 TIT	ŁΕ	1		Chang	ge
NAME						4. 2 NA					
STREET ADDRESS	3					1		FADDRESS			
CITY-ST-ZIP					DELETE	4.4 CIT		T-ZIP		Chang	e
TITLE				Ц	DELETE	5.1 TIT					
NAME						5.2 NA		r ADDRESS			
STREET ADDRESS	3					5.3 ST					
CITY-ST-ZIP	 		· · · · · · · · · · · · · · · · · · ·		DELETE	6.1 TIT		1-936		Chang	e Addition
TITLE					JEEL IL	6.2 NA					,
NAME								F ADDRESS			
STREET ADDRESS	SI					0.3 311	WE !	- MOUESS			

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

SIGNATURE

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/08/99

305)259-3201

Daytime Phone #

CR2E034 (11/98)