	PROFIT ORPORATION INUAL REPORT 1999		Kath Secr	PARTMENT OF STATE verine Harris etary of State DF CORPORATIONS	Feb 16, 199 Secretary		1
	UMENT # 31 ation Name		DN		02-16-1999 90040 002	****150.00	
P.O. BOX 20	lace of Business 1968 S. PUERTO RICO 00928	P.O.	ing Address BOX 20868 PIEDRAS. PUERTO	RICO 00928		TE IN THIS SPACE	
2. Principal	I Place of Business				3. Date Incorporated or Qualifed 11/23/1966	L IN THIS SPACE	;
]]	Frace of Business	2a. M	ailing Address	······································	4. FEI Number		Applied For
Suite, Apt. #, etc.		s	uite, Apt. #, etc.		59-1237 192 Not Applicabl		
City & St	tate	27 C	ity & State			Fee_F	Required
Zip	Country	28			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
	25	Zi [29]	ιp	Country	8. This corporation owes the current	nt year Intangible	to rees
	9. Name and Address	s of Current Register	ed Agent		Personal Property Tax. 10. Name and Address of New Re	Yes	
SEE	South Commerce A Bring FL 33870	VENUE		82 Street Ad	dress (P.O. Box Number is Not Acceptab		
Pursuan office or agent 1	t to the provisions of Section registered agent, or both, in am familiar with and account	ns 607.0502 and 607.1 the State of Florida. S	1508, Florida Statu Such change was a	84 City tes, the above-named con authorized by the corpora	poration submits this statement for the pu		Code registered
INATURE	Signature, typed or printed name of re	are obligations bi, 38	icable. (NOTE DRS	tes, the above-named con authorized by the corporat orida Statutes. E: Registered Agent signature require 13.	poration submits this statement for the pu ion's board of directors. I hereby accept t ed when reinstating) ADDITIONS/CHANGES TO OFFIC	PL urpose of changing its the appointment as re	s registered egistered
ET ADDRESS ST- ZIP	Signeture, typed or printed name of re OFFI P MONTILLA-ROJO, CEC	egistered agent and title if appi ICERS AND DIRECTC	icable. (NOTE	tes, the above-named con authorized by the corporation authorized by the corporation astatutes. Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADORESS	ed when reinstating)	PL urpose of changing its the appointment as re	oregistered egistered
ET ADDRESS	Signeture, typed or printed name of re OFFI P MONTILLA-ROJO, CEC ROAD 19, INTERSECTI	egistered agent and title if appi ICERS AND DIRECTO ION 2 NABO 00966	icable. (NOTE DRS	tes, the above-named con authorized by the corporation of a Statutes. Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	DRS IN 12
ET ADDRESS ST-ZIP T ADDRESS ST-ZIP	Signeture, typed or printed name of re OFFI MONTILLA-ROJO, CEC ROAD 19, INTERSECTI PUEBLO VIEJO, GUAYI V TORRES - CARMEN METRO OFFICE PARK TEXACO PLAZA GU 00 T ROJO-PRENDES, BEATI 7346 SW 57TH AVE	egistered agent and title if appl ICERS AND DIRECTO ION 2 NABO 00966 #303 1968		tes, the above-named consultorized by the corporation of a Statutes. E: Registered Agent signature required as the second se	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	PL Impose of changing its its appointment as re DATE DERS AND DIRECTO Change	DRS IN 12
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