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

FILED Jan 20 1998 8:00am Secretary of State

1. Corpora	UMENT # 3	351922 (O) ON, INC.			
Principal Place of Business Mailing Address 2835 S.W. 3RD AVENUE 2835 S.W. 3RD AVENUE MIAMI FL 33129 MIAMI FL 33129			UE	DO NOT WRITE	
				3. Date Incorporated or Qualified 09/09/1969	IN THIS STACE.
2. Principal Place of Business		2a. Mailing Address		4, FEI Number	Applied For
Sulte, A	pt #. etc	26		59-1269789	Not Applicable \$8.75 Additional
22		27		Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Cour	128 7ip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	This corporation owes or has pa Personal Property Tax due June	_ · _ ·
<u> </u>	9, Name and Add	ress of Current Registered Agent		10. Name and Address of New Re	gistered Agent
11. Pursua office o	or registered agent, or bo	E Address: cetions 607.0502 and 607, 1508, Florida Sta oth, in the State of Florida Such change was coopt the obligations of, Section 607.0505,	83 Sq 2 84 City M 1 atutes, the above-named corpas authorized by the corporat	ress (P.O. Box Number is Not Acceptable 30 5 20 7 200 200 200 200 200 200 200 200 20	FL 85 3 Code 3
SIGNATUR	RE Signature, typed or printed na	arcic of registered agent and title diapplicable (P	NÓTE: Registered Agent signature requir		DATE
12.	PD	OFFICERS AND DIRECTORS DITEIE	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12 Change Addition
TITLE	ORTEGA, JOSE	_	1.1 TITLE 1.2 NAME		Change LI Addition
STREET ADDRES			1.3 STREET AUDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY - ST - 2IP		
TITLE NAME STREET ADDRES	SD ORTEGA, JOSE 5930 S.W. 79TH		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP	MIAMI FL		2 4 CITY-ST-ZIP		
TITLE NAME STREET ADDRES	ss		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		L Change L Addition
CHTY-ST-ZIP			3.4 CITY-ST-7IP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4 2 NAME		
STREET ADDRES	SS		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELFTE	4.4 CITY - \$1 - 7/P		Change Addition
NAME		C Marie	5.2 NAME		The Annual of The Supplication
STREET ADDRES	ss		5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CHY-S1-7IP		
TITLE		DELETE.	61 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRES	SS		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 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 of langed, filter in address.

1-5-98.

305 412-2214.