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
May 11 1998 8:00am
Secretary of State

D 1.	•	MENT o Name EZ & SO		4184	80		(1)													
Pri	ncipal Plac	e of Busines	ss			Mailing A	ddress					- II								
744 W 318T 8T 744 W 318T ST																				
HIALEAH FL 33012						HIALEAH FL 33012										.==				
										DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified										
												1								
2. Principal Place of Business						2a. Mailing Address						02/06/1973 4. FEI Number Appl						Annli	ed For	
21		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				26						59-1477073						Not Applicable		
_	Suite, Apt.	e, Apt. #, etc.				Suite, Apt. #, etc.					·	5. Certificate of Status De						\$8.75		''
22						27						5. Certi	ficate of S	Status D	esired	L		Fee		
	City & State				1	City & State						6. Elect	tion Camp	aign Fi	nancing			\$5.0	0 м	av Be
23					28	28						Trust	Fund Co	ntributio	on	ַ	<u> </u>	Adde		
	Zip	Country			ļ	├ ─			Country			8. This corporation owes or has paid the current year Intangible								
24 25					29 30					Personal Property Tax due June 30. Yes							<u> </u>	No No		
9, Name and Address of Current Registered Agent										l NI-	ame	10, Nam	ie and Ad	aress	New 10	Hegis	itered A	Agent .		
JIMENEZ, JORGE										'`	201170									
744 W. 31ST STREET										St	reet Addre	ess (P.O. B	ox Numbe	er is No	Accep	table))			
HIALEAH FL									83											
										_	·····									
									84	Ci	ty						FL	85 Zij	o Co	de
11.	Pursuant	to the provis	ions of S	octions 607	0502 and	607.150	B, Florida Statu	tes, the	above	e-na	med corpo	oration sub	mits this s	tateme	nt for the	e purp	pose of	changing	its r	egistered
	office or r	egistered aç ını familiar w	pent, or be ith, and a	oth, in the St iccept the of	ate of Fio digations	rida. Suc of. Sectio	h change was on 607.0505, F	authoriz Iorida St	ed by	y the s.	corporation	on's board	of directo	rs. I he	eby acc	cept th	he appo	ointment i	ıs re	gistered
SIC	NATURE				9	.,				-										
JIC	INCIONE	Signature, typed	l or printed is	ame of registered	agen) and to	tle if applica	ble (NO	TE Registe	red Age	ent siç	nature require	d when reinsta	ting)				DATE			
12.				OFFICERS.	AND DIRI	ECTORS		13				ADDIT	TIONS/CH	ANGES	TO OF	FICER				
TITL		P HARMET ADDOC							1.1 TITLE									Change	L	Addition
	NAME JIMENEZ,JORGE							1.2 NAME												
	STREET ADDRESS 744 W. 31ST STREET CITY-ST-ZIP HIALEAH FL							1.3 STREET ADDRESS												
CITY	- ST - ZIP	S	III TL				DELETE	_	CITY-S	T - ZIF	<u>'</u>							Change		☐ Addition
NAM			DUA LE	DON			_ beach											CT CHAIR		
	-	GUILLERMO, LEDON 1050 W. 33RD STREET							2.2 NAME 2.3 STREET ADDRESS											
	IREET ADDRESS 1050 W. 33RD STREET ITY-ST-ZIP HIALEAH FL							2. 4 CITY-ST-ZIP												
TITL		110000					DELETE		TITLE	υ1 · ΔΙ								☐ Change		Addition
NAM								- 1	NAME									-	_	
STRE	EET ADDRESS							3.3	STREET	ADD	RESS									
CITY	-ST-ZIP							3.4	CITY-S	ST - Z fl	•									
TITLI							DELETE		TITLE									Change		Addition
NAM	IE							4.2	NAME											
STRE	EET ADORESS							4.3	STREET	ADOF	RESS									
CITY	- ST- ZIP							4.4	City-S	T - ZIF	·									_
TITLI							DELETE		TITLE									Change		Addition
NAM									NAME											
	ET ADORESS								STREET											
	-ST-ZIP						Driete		CITY-S	T- 21P	<u> </u>									T Andresis
TITL							☐ DELETE		TITLE									Change	٠ ١	Addition
NAM									NAME											
	ET ADDRESS								STREET											
	-ST-ZIP	certify that th	e informa	ition supplied	d with this	filina da	es not qualify		city-s xemp			Section 119).07(3)(i).	Florida	Statutes	s. I furi	ther cer	rtify that th	ne inf	ormation

4. 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 on the receiver of true converse to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changet, or on an attackment with an address.

SIGNATURE

Tresident

11- 20-98