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

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

M. P. R. CORPORATION

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

**FILED** Apr 03 1998 8:00am Secretary of State

Change

\_\_\_ Change

Addition

Addition

Principal Plac	ce of Business	Mailing Address			( 100411 01014 01040 11401 04114 08100 1141 01011 0	INIA MINII MINII NINII MINII INNI
6995 NW 46	TH STREET	6995 NW 46TH STREE	T			
MIAMI FL 33166		A Miami Fl 33166		DO NOT WRITE IN THIS SPACE		
US		US		3. Date Incorporated or Qualified		
1					02/15/1974	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-1545600	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			5. Centificate of Status Desired	Fee Required
City & Stat	te	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Ζιρ	Country	Zip	Cou	ıntry	8. This corporation owes or has paid the o	current year Intangible
24	25	[29]	30		Personal Property Tax due June 30.	Yes No
Name and Address of Current Registered Agent GILBRIDGE, JAMES F.				81 Name	10. Name and Address of New Registere	d Agent
2 5 Mi	NE BISCAYNE TOWER, 15TH F SOUTH BISCAYNE BLVD. AMI FL 33131			83 City	dress (P.O. Box Number is Not Acceptable)	
oπice or i agent I a	to the provisions of Sections 607.0 registered agent, or both, in the Statem familiar with, and accept the obligations.	ile of Horida. Such change wa	is authorized	d by the corpora	poration submits this statement for the purpose alion's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE	Signature: typed or printed name of registered	igent and little if applicable (N	OTE Registered	i Agont signature requi	incd when reinstating) DATE	
12.	OFFICERS A	IND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TI	LF		Change Addition
NAME	RODRIGUEZ (ERNESTO)		1.2 NA	M€		
STREET ADDRESS	6995 NW 46TH STREET, #.	Ą	1.3 \$1	REET ADDRESS		
CITY - ST - ZIP	MIAMI FL		1.4 CI	ly∙S1-ZiP		
TITLE	DV	DELFTE	2.1 1	LF		Change Addition
NAME	RODRIGUEZ, NORMA B.		2.2 NA	ME		
STREET ADDRESS	6995 NW 46TH STREET, #/	Ą	2.3 ST	REET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.4 C	17Y-S1-21P		
TITLE		☐ OFLETE	3.1 111	LE		Change Addition
NAME	1		3.2 NA	ME		
STREET ADDRESS			3351	REET ADDRESS		
CITY-ST-ZIP			3 4. CI	TY-ST-ZIP		
TITLE		DELETE	4.1 111	LE		Change Addition
NAME			4. 2 N/	AME		
PERCENT ADDRESS			40.03	0567 1555666		

64 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 13 if changed, or on an attachment with an address.

4.4 CITY - ST - ZiP

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 THILE

5.2 NAME

6.1 TITLE

**6.2 NAME** 

DELETE

DELETE