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

DOCUMENT # 458896

(8)

FILED Jan 15 1998 8:00am Secretary of State

1.	GAMAR ENTERPRISES, INC.	(0)		 	i 818/2 8/8/1 818/1 818/1 8/8/1 188/
Pri	Incipal Place of Business	Mailing Address			I BIBIN BOBIN BIBIN BUBIN BIBIN 1881
175 FONTAINEBLEAU BLVD 175 FONTAINEBLEAU BLVD			n		
SUITÉ 2-E		SUITE 2-E			
MIAMI FL 33172		MIAMI FL 33172		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
3	Principal Place of Business	2a. Mailing Address		07/31/1974 4. FEI Number	
_	Filicipal Flace of Bosilless	F1 "			Applied for
21	Sulte, Apt. #, etc.	26 Suite: Apt. #, etc.		59-1839742	Not Applicable \$8.75 Additional
22	27			5. Certificate of Status Desired	Fee Required
	City & State City & State			6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
	Zip Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25		30	Personal Property Tax due June 30.	Yes No
	9, Name and Address of Current	Registered Agent		10. Name and Address of New Registe	red Agent
SENDAR, JUSE A.			81 Name	RER FLISED J	
175 FONTAINEBLEAU BLVD			82 Street Addre	RER, ELISEO J, ess (P.O. Box Number is Not Acceptable)	
	SUITE 2-E		1/5 FO	NTAINEBLEAU BLVU.	
	MIAMI FL 33172		83 SUITE	2-E	
			84 City		85 Zip Code
- 34			MIAM		FL 33172
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIC	SIgnature, typed by printed name of registered ages	4 and title if applicable (NO1E	Registered Agent signature require	ed when reinstating) DA	
12.			13.	ADDITIONS/CHANGES TO OFFICERS	
ŢΠĻ	le AS	DELETE	1.1 DILE		Change Addition
NAA	WE VALDES-FAULI, RAUL E		12 NAME		
STR	REET ADDRESS 2 S BISCAYNE BLVD #3400		1.3 STREET ADDRESS		
ĈIT	Y-ST-ZIP MIAMI, FL 00000		1.4 CITY - ST - 7IP		
TITL	1 1.0	☐ DELETE	2.1 TITLE		Change Addition
NAM			2.2 NAME		
STR	LEET ADDRESS 2 S BISCAYNE BLVD #3400		2.3 STREET ADDRESS		
	Y-ST-ZIP MIAMI, FL 00000		2, 4 CHY-ST-ZIP		
TITL		☐ DELETE	3.1 TITL !		Change Addition
NAM			3.2 NAME		
-	SEET ADDRESS		3.3 STREET ADDRESS		
	Y-ST-ZIP	DELETE	3.4. C(1Y-S1-7)P		Chongs D 4449'-
TITL	į.	LI OFFICIE	4.1 TOLE		Change Addition
NAM			4. 2 NAME		
	EET ADDRESS		4.3 STREET ADDRESS		
CITY	Y-ST-ZIP	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAM		புமார	5.7 IDE		
	EET ADDRESS		i i		
	Y-ST-ZIP		5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITL		DELETE	61 TITLE		☐ Change ☐ Addition
NAM			62 NAME		
	EET ADDRESS		63 STREET ADDRESS		
	Y-ST-ZIP		64 CITY+ST-ZIP		

14. Thereby certify that the information supplied with this filling 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 eath; that I am an officer or director of the corporation of the receiver or trusted 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.

1/198 (300)22-256