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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 526384

(3)

MONTEJO ENTERPRISES, INC.

Principal Place of Business

Mailing Address

\$496 NW 7TH STREET

3496 NW 7TH STREET

## **FILED** May 13 1997 8:00am Secretary of State



MIAMI FL 3312	5	MIAMI FL 33125-4014							
						3. Date Incorporated or Qualified 02/22/1977		te of L	ast Report <b>96</b>
2. Principal Place of Business 21		2a. Mailing Address 26			4. FEI Number 59-1725276			Applied For Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, otc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	e	City & State				Election Campaign Financing     Trust Fund Contribution			.00 May Be ided to Fees
Zip 24	Country 25	Zip 29	30]	itry			Yes [	] No	der s. 199.032,
	9. Name and Address of Currer	nt Registered Agent			,	10. Name and Address of New Re	gistered A	\gent	.,
	itejo, w.		[1	B1	Narne				
	N.W. 7TH ST.		}	82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)		·
MIAN	AII FL 33125		-	63					
i				64	City		FL	85	Zip Code
office or r agent. I a SIGNATURE	egistered agon), or both, in the State in familiar with, and accept the oblig  Signature typed or printed name of registered agri	of Florida. Such change was ations of, Section 607,0505, Fl	authorized Iorida Statu	by ites	the corporati s.	oration submits this statement for the pion's board of directors. I hereby acception when reinstating	of the app	ointme	nl as registered
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		DIREC	CTORS IN 12
TITLE	PD	DELETE	1.1 1111	.t				Ch	
NAME	MONTEJO, WILFREDO JOSE		1.2 NAM	VIE					
STREET ADDRESS	4775 S.W. 1ST ST.		1.3 STR	REFT.	ADDRESS				
CITY-ST-ZIP	MIAMI FL		1.4 CIT	Y-\$1	T- 7H				
TITLE	VD	DELETE	211118			-		Cha	ange LJ Additio
NAME	MONTEJO, TOMAS W. 4775 S.W. 1ST ST.		2 2 NA)						
STREET ADDRESS	4/75 5.W. 151 51. MIAMI FL				ADDRESS				
CITY-ST-ZIP	ST ST	DELETE	2. <b>4</b> CiT 3.1 Titl		51 - 76P			☐ Chi	ange Additio
NAME	MONTEJO, BARBARA G.		3.2 NA						ange nauno
STREET ADDRESS	4775 S.W. 1ST ST.		1		ADDRESS				
CITY-ST-ZIP	MIAMI FL		3.4. 011						
TITLE	D	DECETE	4.1 3(1)					Ch	ange 🔲 Additio
NAME	MONTEJO, BARBARA G.		4. 2 NA	ME					
STREET ADDRESS	4775 S.W. 1ST ST.		4.3 S1F	EET.	ADDRESS				
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STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE		DELETE.	54011		1-7P	T. T		Ch	ange [ ] Additio
NAME		L. Detter	6.1 THU 6.2 NAM					டு	sige LT Madillo
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIP	//		6.4 CiT						
- U4"   VI " #U			U.4 (/II	ان.	· . • · ·				

14. I do hereby certify that the information indicated on this annual the lam an officer or director of the contappears in Block 12 or Block 13 if prolied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the fiver supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that if no receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name on an altachment with an address.