

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

01895

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90282 023 ***150.00

DOCUMENT # 540463

1. Corporation Name

MIAMI - SEVENTH CORP. ✓

Principal Place of Business

601 BRICKELL KEY DRIVE
SUITE 805
MIAMI FL 33131

Mailing Address

601 BRICKELL KEY DRIVE
SUITE 805
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

6/10/1977

4. FEI Number

59-1788809

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 601 BRICKELL KEY DR

27 Suite, Apt. #, etc.

28 Suite 805

28 MIAMI, FL

29 Zip Country

30 33131 USN

9. Name and Address of Current Registered Agent

ALLEN & GALEGO
601 BRICKELL KEY DRIVE
SUITE 805
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name Allen & GALEGO

82 Street Address (P.O. Box Number is Not Acceptable)

83 601 BRICKELL KEY DR #805

84 City MIAMI

FL

85 Zip Code 33131

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 registered 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent/Signature required when reinstating)

DATE

Robert W. Allen, President of Allen & Galego

4/29/99

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME Alfredo CLO
STREET ADDRESS 601 BRICKELL KEY DR #805
CITY-ST-ZIP MIAMI, FL 33131

TITLE SD ☐ DELETE

NAME IDLE CLO
STREET ADDRESS 601 BRICKELL KEY DR #805
CITY-ST-ZIP MIAMI, FL 33131

TITLE TD ☒ DELETE

NAME BLANCA MARTINEZ
STREET ADDRESS 14250 SW 62ND STREET
CITY-ST-ZIP MIAMI, FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert W. Allen, President

Date

4/29/99

Daytime Phone #

305-372-3300

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