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 #

(1)

SPANISH ENGRAVING CORP.

FILED Apr 28 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·		E SOURDE MISSO DESID SUSON STAIN FOLDE SUSA	FIF COUNT BIOM WISH SI	841 01011 1001
932 W FLAGLER ST MAAM FL 33130 US		932 W FLAGLER STREET MIAMI FL 33130		DO NOT WRITE IN TI	HIS SPACE		
					3. Date Incorporated or Qualified 04/24/1978		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
21		26			59-1841954	No	t Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A Fee Re	
City & State		City & State	City & State		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 10. Name and Address of New Registered Agent		
_	9. Name and Address of Curre	ont Hegistered Agent	81	Name	10. Name and Address of New Registe	Led Wieur	
	SPINOSA, FRANKLIN		81	INdille			
	32 W. FLAGLER ST. IIAMI FL 33130		82 Street A		ress (P.O. Box Number is Not Acceptable)		
			83				
			84	City		FL 85 Zip C	Code
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Stat in familiar with, and accept the obli	e of Florida. Such change was at	uthorized by	the corporat	poration submits this statement for the purpo- tion's board of directors. I hereby accept the	se of changing its appointment as	s registered registered
SIGNATURE	Stgnature, typud or printed name of registered ai	neal and title diapolicable (NOTE	Registered Apr	ant signature regue	red when reinstating) DA	TE.	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 12
TITLE	PT	DELETE	1.1 TITLE			Change	Addition
NAME	ESPINOSA, FRANKLIN		1.2 NAME			1	
STREET ADDRESS	932 W. FLAGLER ST.		1.3 STREET ADDRESS				
CITY+ST-ZIP	MIAMI FL 33130	IAMI FL 33130		ST - ZIP			
TITLE	VS	DELETE	2.1 TITLE			☐ Change	Addition
NAME	ESPINOSA, ANA		22 NAME				ĺ
STREET ADDRESS	932 W. FLAGLER ST.		2.3 STREET ADDRESS				1
CITY-ST-ZIP	MIAMI FL		2.4 CITY-	ST-ZIP			
TITLE		DELETE	3 1 TITLE			☐ Change	Addition
NAME	į		3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			L Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			ŀ
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				į
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY - 1	ST - 21P			
TITLE		☐ DELETE	6.1 TITLE			Change	L Addition
NAME			6.2 NAME				
STREET ADDRESS	6.3		6.3 STREE	ADDRESS	SS		+
CITY-ST-ZIP			6.4 CiTY - 5	ST-ZIP	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
14, 1 hereby of	certify that the information supplied	with this filing does not qualify for	r the exemp	ition stated in at my signati	Section 119.07(3)(i), Florida Statutes. I furthure shall have the same legal effect as if mad	er certify that the le under oath: the	intormation at I am an

promontal aurition report is true and accurate and that my signature shall have the same legal effect as it made under dam; that I am a the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the receiver this han address. 305-324-0807