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PROFIT CORPORATION ANNUAL REPORT		Katheri	RTMENT OF STATE ne Harris y of State	99 MAR	22 Mil0:	t ; 3
	1999	DIVISION OF C	CORPORATIONS			ara
1. Corporau		3		TÄLLÄ	13 5.0 10 H 418 5.	RIDA
,M-G-I-E	3. CORPORATION			4 FURNAL BIS DE RELOCION ALBOR ALBORA (1800)	na 2010 de la come de dos de deservicios	ANDRA BERLIN JERA
Principal Place of Business Mailing Address 305 NW 127H AVE. 305 NW 127H AVE. MAMIL FL 20129 MAMIL FL 20129			S S S S S S S S S S S S S S S S S S S	ol Miser Miller Arthur Miller i	II DH WINI (SAI	
				DO NOT WRITE II 3. Date Incorporated or Qualified	THIS SPACE	
				10/02/1978		
2. Principal Place of Business 2a. Mailing Address				4, FEI Number	<u> </u>	plied For
21 1/U Suite, Apt	N.E. 29th Street	26 170 N.E. 29 Suite, Apt. #, etc.	th Street	59-2176375	48 75	d Applicable
22		27		5. Certificate of Status Desired	Fee Re	
City & Sta Mieπ	Me mi, Florida 33137	City & State 26 Miami, Flor	ida 33137	6. Election Campaign Financing Trust Fund Contribution	- \$5.00 Added t	
Zip	Country	Zip	Country	8. This corporation owes the current y	ear Intangible	
24	9. Name and Address of Curr		30	Personal Property Tex. 10. Name and Address of New Regis		®No
		rent Registareo Agent	81 Name	CONZALEZ, MARIANO	HEIDU ANGERI	
	NE, LAWRENCE-E. - ANN 1271-1-AVE.		82 Street	Address (P.O. Box Number is Not Acceptable)		
	MI, FL MFL 93120		83	170 N.E. 29th Street		
	• • • • • • • • • • • • • • • • • • • •		<u> </u>			
			84 City	Miami,	FL 85 Zip (137
11. Pursuant office or	to the provisions of Sections 607.0 registered agent, or both, in the Sta	502 and 607.1508, Florida Statuter ite of Florida. Such change was au	s, the above-named thorized by the corpo	corporation submits this statement for the purporation's board of directors. I heraby accept the	ose of changing its appointment as req	registered pistered
	- 140 mg . 10 mg / / 1 mg/ 1 mg / 1	igations of Section 607.0505, Flori	da Statutes.		210-9	9
SIGNATURE	Mighatire. Notes of Stilling rapid of refutlings		Registered Agent eigneture re		VIE -	
TITLE	OFFICERS,	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12
HAVE	GONZALEZ, MARIANO	<u></u>	12 NAME			
\$TREET ADDRESS	4		1.3 STREET ADDRESS	33137]
CITY-SY-ZIP TITLE	MIAMI FL VD	☐ D£LĒTE	1,4 CITY+ST-ZIP 2,1 TITLE		Change	Addition
NAME	BERMUDEZ, TOMAG-	Coperie	22 NAME	VD GONZALEZ, JR., MARIANO	₽Ç o∴go	
STREET ADDRESS	170 NE 20TH ST.		2.5 STREET ADDRESS	170 N.E29th Street		
CITY-ST-ZIP	MIAM FL	7100.550	2.4 CITY-ST-ZIP	Miami, Fr. 33137	[K] Change	
TITLE	STD -Gonzalez,-Isabel	DELETE	31 MLE 32 NAME		Elmade	Addition
STREET ADDRESS	l		3.3 STREET ADDRESS	manufacture of the second	,	
Crity ST-ZIP	MIAMI FL		34 CITY-ST-ZIP	33137		
TITLE NAME		□ DELETE	41 RILE 4,2 NAME	* =	☐ Change	☐ Addition
STREET ADDRESS			43 STREET ADDRESS		•	ĵ
CITY-ST-ZIP			4.4 CITY-ST-2P			
TITLE		☐ DELETE	51 TITLE 52 NAME		☐ Change	Addition
NAME STREET ADORESS			53 STREET ADDRESS			[
CITY-ST-ZP			54 CMY-ST-ZM			
TITLE	I		6.1 TITLE	_	☐ Change	Addition
NAME		☐ DELETE	1			
		∐ D€LETE	62 NAME			
STREET ADDRESS		∐ D€1ETE	1	e de la companya de	_	}
STREET ADDRESS City-St-ZIP 14. I hereby c	cortify that the information supplied on this annual report or supplied	with this filing does not quality for th	62 NAME 63 STREET ADDRESS 64 CITY-ST-ZP he exemption stated	in Section 119.07(3)(i), Florida Statules, I furth ture shall have the same legal effect as if mark	er certify that the int	formation
STREET ADDRESS CITY-ST-ZIP 14. I hereby of indicated officer or	on this annual report or supplement director of the corporation or the rec	with this filing does not qualify for th lat annual report is true and accura- citiver or trustee empoyered to say	62 NAME 63 STREET ADDRESS 64 CITY.ST.ZP he exemption stated to and that my signal cute this report as re	ture shall have the same legal effect as # mark equired by Chapter 607, Florida Statutes; and t	under eath; that I i	n n ma ma
STREET ADDRESS. CITY-ST-ZIP 14. I hereby of indicated officer or Block 12 i	on this ennual report or supplement director of the corporation or the rec or Block 13 if changed, or on an att.	with this filing does not qualify for th lat annual report is true and accura- citiver or trustee empoyered to say	62 NAME 63 STREET ADDRESS 64 CITY.ST.ZP he exemption stated to and that my signal cute this report as re	ture shall have the same legal effect as # mark equired by Chapter 607, Florida Statutes; and t	under eath; that I i	n n ma ma
STREET ADDRESS CITY-ST-ZIP 14. I hereby of indicated officer or	on this ennual report or supplement director of the corporation or the rec or Block 13 if changed, or on an att.	with this filing does not qualify for th lat annual report is true and accura- citiver or trustee empoyered to say	62 NAME 63 STREET ADDRESS 64 CITY.ST.ZP he exemption stated to and that my signal cute this report as re	ture shall have the same legal effect as # mark equired by Chapter 607, Florida Statutes; and t	under eath; that I i	n n ma ma