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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 596272

. Corporation Name

WILLIAM REY ENTERPRISES, INC.

·	of Business	Mailing Address					
	, .	9465 HARDING AVE					•
9465 HARDING AVE SURFSIDE FL 33154		SURFSIDE FL 33154			UC CDACE		
US		US		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed		j
					12/05/1978		Und Fee
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		olied For
<u> </u>		26			59-1905026		Applicable
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	
<u></u>		27			5. Certificate of States Section 13	Fee Rec	
City & State		City & State			6. Election Campaign Financing	\$5.00	
¬ '		28		•	Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Соц	ntry	8. This corporation owes the current year	Intangible	_
- '	25	29	0		Personal Property Tax.		□No
4	9. Name and Address of Curre				10. Name and Address of New Register	ed Agent	
	5. Hall and Add St. Dat 7 at		•	81 Name			
REY	EVLYN.				(D.O. Pau Number in Not Accomtable)		
1080	STILLWATER ST.	•		82 Street Add	ress (P.O. Box Number is Not Acceptable)		
	11 BCH. FL 33141			83			E 90 44
IAIIVIAI	II BUN. FL 33141			**	一	hi 19. <u>Ph</u> i gair t	Fig. 3.21. [2.1]
	•			84 City	The state of the s	85 Zip C	Code
11. Pursuant t	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	s, the a	bove-named corp	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	pointment as reg	gistered
office or re	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was aut eations of Section 607.0505, Florida	ınonzet da Stati	utes.	on's board of directors. Thereby doospe are ap		
ಲಾ agent. i an	III lattillar with, and accept the oblig	and a ci, comment of the city				•	
SIGNATURE _a	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: F	Registered	Agent signature require	ed when reinstating) 🤾 DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		RS IN 12
TITLE	PD	☐ DELETE	1.1 TI	TLE	15 B 19 19	☐ Change	Addition Addition
	REY, WILLIAM		1.2 N	AME			•
NAME	1080 STILLWATER DR			TREET ADDRESS			
STREET ADDRESS			li .	1			,
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TITLE	D	Decere				•	
NAME	rey,evelyn		2.2 N	ļ			
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CITY-ST-ZIP	MIAMI BEACH, FL 33141	<u> </u>	2.40	ITY-ST-ZIP		Change	Addition
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15 A	ELLE		3.2 N	AME			
NAME:							Te W. Hart 14
NAME	\$10 SALES		3.3 \$	TREET ADDRESS	・ 「大き」「数」とする。である。雑乱で会覧で	otablear a	* • [] [] [] [] []
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SIGNATURE:

SIGNATURE REQUIRED

7/15/99 308 86U 6U 51

FILED

Feb 06, 1999 8:00am

Secretary of State

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