Principal Place of 8330 NW 53 ST	998 IENT # 60850( VTRY PROFESSIONAL SE				ry of Sta	ill
8390 NW 53 \$1		RVICES, INC.		   LECKAR BANK BENELIKAN ANA ANA ANA	TAK OLOH KALI KALI ALAK ALAK	
Principal Place of Business         Mailing Address           \$390 NW 53 ST STE A105         \$390 NW 53 ST STE A105           P.O. BOX 523350         P.O. BOX 523350           MIAMI FL 33166         MIAMI FL 33166				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified		
		······································		01/31/1979		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-1888710		lied For Applicab
21 Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	<b>\$8.75</b> Ad	
22 City & State		27 City & State			Fee Req	·
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 M	
Zip	Country	Ζιρ	Country	8. This corporation owes or has p		
M	25 9. Name and Address of Curren	29 It Registered Agent	30	Personal Property Tax due Jun 10. Name and Address of New R		No
SIGNATURE				poration submits this statement for the tion's board of directors. I hereby acce		registere agisterec
<u> </u>	nature, typed or privited name of registered age OFFICERS AND		E: Registered Agent signature requi	ADDITIONS/CHANGES TO OFF	DATE	IN 12
TITLE	PD	DELETE	1.1 TIFLE		Change	Additi
NAME STREET ADORESS	IZQUIERDO, MARIA R 421 S.W. 87TH COURT		1.2 NAME 1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD IZQUIERDO, TERESA E 411 S.W. 87TH COURT MIAMI FL	DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		Change	Addili
TITLE NAME STREET ADDRESS	TD IZQUIERDO, CARLOS B 421 S.W. 87TH COURT MIAMI FL	DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		Change	Additi
<u>City-st-zip</u> Title NAME STREET ADORESS		DELETE	34. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS		Change	Addili
<u>City - St - Zip</u> Title NAME STREET ADDRESS		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		Change	Additio
CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP		DELETE	54 CITY-ST-ZIP 61 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		Change	Addini
14. I hereby cer indicated on	tify that the information supplied wi this annual report or supplementa actor of the corporation or the rece	annual report is true and acc	or the exemption stated in urate and that my signatu	Section 119.07(3)(i), Florida Statutes. ure shall have the same legal effect as	if made under oath: that	am an