## 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** 

30

Name

## **DOCUMENT # 655189**

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CHEN-SEM, DORNEL

20028 N.W. 64TH PLACE

Principal Place of Business	Mailing Address
10935 N.W. 27TH AVENUE MIAMI FL 33167-3409	10935 N.W. 27TH AVENUE MIAMI FL 33167-3409
Principal Place of Business 21	2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

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9. Name and Address of Current Registered Agent

## Mar 10, 1999 8:00 am **Secretary of State**

03-10-1999 90043 040 \*\*\*150.00



Applied For Not Applicable

\$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

☐ Yes

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

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

02/07/1980 4. FEI Number

59-2029595

HIALEAH FL 33015			83			
			84	City	85 Z	ip Code
			04	City	<b>FL</b> [**] *	.p code
office or re	to the provisions of Sections 607.0502 and 607.1508 egistered agent, or both, in the State of Florida. Such familiar with, and accept the obligations of, Section	ı change was author	ized by	the corp	corporation submits this statement for the purpose of changing oration's board of directors. I hereby accept the appointment as	its registered registered
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	. (NOTE: Regis	tered Age	nt signature	required when reinstating) DATE	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECT	TORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Chan	ge 🗌 Addition
NAME	CHEN-SEM, DORNEL	1	1.2 NAME			
STREET ADORESS	20028 N.W. 64 PLACE		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	HIALEAH FL		1.4 CITY-S	T-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		Chan	ge
NAME	MOHAMMED, TELECKIES		22 NAME		,	
STREET ADDRESS	5780 NW 191 TERRACE		2 3 STREE	T ADDRESS		
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-	ST-ZIP		
TITLE	M	☐ DELETE	3.1 TITLE		Chan	ge 🔲 Addition
NAME	CHEN-SEM, ALFRED	1	3.2 NAME			
STREET ADDRESS	20028 NE 64 PLACE		3.3 STREE	T ADDRESS		•
CITY-ST-ZIP	HIALEAH FL.		3.4. CITY-5	ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Chan	ge
NAME	CHEN-SEM, NIKI P.		4. 2 NAME			
STREET ADDRESS	20028 NW 64 PLACE		4.3 STREE	T ADDRESS		:
CITY-ST-ZIP	HIALEAH FL		4.4 CITY-S	T-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Chan	ge Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		
TITLE	· · · · · · · · · · · · · · · · · · ·		6.1 TITLE		Chan	ge Addition
NAMÉ		į.	6.2 NAME			
STREET ADDRESS		f.	6.3 STREE	T ADDRESS		
CITY-ST-ZIP			6.4 CITY-S			
14. I hereby o	certify that the information supplied with this filing doe	s not qualify for the	exempt	ion state	d in Section 119.07(3)(i), Florida Statutes. I further certify that the	ne information

indicated on an 8 annual report or supplemental annual report is due and accurate and that my signature shall have the same legal effect as it made under oath; that I am all 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.