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

Mailing Address

MIAMI FL 33177

12195 SW 152ND ST

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 662603

1. Corporation Name

Principal Place of Business

12195 SW 152ND ST

MIAMI FL 33177

A. TONY REBUSTILLO, INC.

					05/14/1980			
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Ap	plied For	
21		26			59-2000410	No	t Applicable	
		Suite, Apt. #, etc.	uite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A		
		27			5. Certificate of Status Desired	Fee Re	quired	
City & State City & State				6. Election Campaign Financing	\$5.00	May Be		
23		28			Trust Fund Contribution	Added t	o Fees	
Zip	Country Zip		Cour	try	This corporation owes the current year Inta		_ }	
24	25	29	30		Personal Property Tax.		□No	
ļ	9. Name and Address of Curr	ent Registered Agent		nel 31	10. Name and Address of New Registered A	gent		
DER	HISTILLO TONIV			B1 Nan	ne			
REBUSTILLO, TONY 12195 S.W. 152ND STREET				B2 Stre	reet Address (P.O. Box Number is Not Acceptable)			
	WI FL 33177							
I IVIICSI	WITE 33177			B3			· 10 福福	
			}	B4 City	र विकास के प्राप्त के इस के अपने किस्ता के प्राप्त के प	85 Zip C	Code	
40000					F <u>L</u>			
11. Pursuant	to the provisions of Sections 607.09	502 and 607.1508, Florida Stat	utes, the ab	ove-nam	ed corporation submits this statement for the purpose of crooration's board of directors. I hereby accept the appoin	hanging its	registered	
	em familiar with, and accept the oblid				rporadon's board of directors, i flereby accept the appoint	muent as tel	gistered	
ayent. ra	in familiar with, and accept the oblig	gations of, occition our tooo, i	ionua Statui	es.	the state of the s	•		
	mir tarrillar with, and accept the oblig	ganons on, occurr our .5000, 1	ionua Statu	es.				
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SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable. (NO	TE: Registered A	gent signatu	ADDITIONS/CHANGES TO OFFICERS AND			
SIGNATURE 12. TITLE	Signature, typed or printed name of registered at OFFICERS A	gent and title if applicable. (NO	TE: Registered A	gent signatu	7 7 7 7 7 7	D DIRECTO	RS IN 12	
SIGNATURE	Signature, typed or printed name of registered at OFFICERS A PSD REBUSTILLO, A. TONY	gent and title if applicable. (NO	TE: Registered A	gent signatu	ADDITIONS/CHANGES TO OFFICERS AND			
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6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an 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 13 if changed or open attachment with an address, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ DELETE

☐ DELETE

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

A 14.

FILED

Feb 18, 1999 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

Date Incorporated or Qualifed ...

02-18-1999 90005 013 ***150.00

Change

☐ Addition

Addition