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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 664195

(5)

1. Corporation ALNOR	ENTERPRISES, INC.	3 (3)			
Principal Plac	e of Business	Mailing Address			DIN BOOKI BOOK O'DIN BIDIK IBDI
8911 SW 52 ST 8811 SW 52 ST					,
MIAMI FL 33165 MIAMI FL 33165				DO NOT WRITE IN THE	e enve
				3. Date Incorporated or Qualified	STACE
				02/04/1980	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1981479	Not Applicable
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stat	City & State City & State			6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution	Added to Fees
Zip	Country	7 _{(P})	Country	8. This corporation owes or has paid the o	
24	25	29	30	Personal Property Tax due June 30.	Yes No
g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 Name					
NUMMA UIENU					
8811 SW 52ND ST			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33165			83		
			84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am tamiliar with, and accept the obligations of Section 607.0505, Florida Statutes.					
SIGNATURE		garanto or, caron en con soco, i a	orac oracio.		
Signature, typed or printed name of registered agent and title if applicable. (NOTE			F Registered Agent signature requir		
12.	OFFICERS A	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTORS IN 12 Change Addition
NAME	OTERO, MARIA C	ב-ן טנננונ	1.2 NAME		Ci ouguide Ci vaquion
STREET ADDRESS	8811 SW 52 ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 00000		1.4 CITY-ST-ZIP		
TITLE	DP	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	OTERO, NORMA		2.2 NAME		
STREET ADDRESS	8811 SW 52 ST		2.3 STREE1 ADDRESS		
CITY-ST-ZIP	MIAMI, FL 00000		2.4 CITY - ST - ZIP		
TITLE	\$D	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	LAURIDO, XIOMARA		3.2 NAME		
STREET ADDRESS	8811 SW 52 ST.		3.3 STREFT ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	3.4. CITY-ST-ZIP		Change Addition
NAME		Diction	4. 2 NAME		C ouruge C Hootiful
STREET ADDRESS			4.3 STREET ADDRESS		
CITY+ST-ZIP			4.4 City-St-Zip		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP	·	
TITLE		DELETE	6.1 TITL€		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	[6.3 STREET ADDRESS		

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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

House

NORMA OTE

305 661-1197

FILED

May 06 1998 8:00am

Secretary of State