SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

CITY-ST-ZIP

Jul 27 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** (5) 1. Corporation Name 7 Y 43, INC. Principal Place of Business Mailing Address 4315 N.W. 7TH ST. 4315 N.W. 7TH ST. MIAMI FL 33126 MIAMI FL 33126 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 07/08/1980 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 59-2539896 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No Zip Country Zip Country 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent OSORIO, JOSE 4315 NW 7TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FLORIDA FL 33126 83 84 City Zip Code 85 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 familiar with, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE CR2E034 (5/98) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE 1.1 TITLE DELETE Change Addition OSORIO, JOSE NAME 1.2 NAME 622 N.W. 57 COURT STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition OSORIO, CRUZANA NAME 2.2 NAME 622 N.W. 57 COURT STREET ADDRESS 2.3 STREET ADDRESS MIANT FL CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE 3.1 TITLE DELETE ___ Addition NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP 4.1 TITLE TITLE DELETE Addition Change NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADORESS CITY-ST-ZIP 4.4 CITY-ST-ZIP 100002603334 TITLE DELETE 5.1 TITLE -07/31/98--01004--029 NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS ***150.00 5.4 CITY-ST-ZIP CITY ST-ZIP TITLE 6.1 TITLE Change DELETE 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 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 trusted 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.

FILED

752

July 14, 1998.-

To Whom It May Concern:

I am writing to you due to the fact that we did not receive the first notice and we are writing you to see if you will excuse the penalty we are enclosing a check in the amount of \$150.00 dolares to cover the fees of the corporation for this year We have a problem on my area because they change postal delivery person and sometimes mail get lost this is the reason we are writing to you about the penalty hoping that you could help. me.

Sincerely Yours,

JOSE OSORI