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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F10034

MANUEL PEREZ-PADILLA, P.A.

(9)

FILED Mar 11 1998 8:00am Secretary of State

| | | | | | | | l |
|---|---|---------------------------------------|------------------------------|---|--|-----------------------------------|---------|
| Principal Place of Business Mailing Address | | | | | - 1 1001100 1101 1101 0011 0010 1111 0101 611 | THE BORNE BERNE BERNE BORNE BORNE | ļ! |
| 3231 S.W. 16TH TERRACE | | 3231 S.W. 16TH TERRACE | - | | | | |
| C/O MAMUEL PEREZ-PADILLA | | C/O MAMUEL PEREZ-PADILLA | | | 1 | | |
| MIAMI FL 33145 | | MIAMI FL 33145 | | | DO NOT WRITE IN THIS SPACE | | |
| | | | | | 3. Date Incorporated or Qualified | | - } |
| | | | | | 10/30/1980 | | |
| · ' | lace of Business | 2a. Mailing Address | | | 4. FEI Number | Applied Fo | |
| Suite, Apt. #, etc. | | Suite Apt # ote | | 59-2038737 | Not Applic | | |
| | | Suite, Apt. #, etc. | ├ - ¬ | | 5. Certificate of Status Desired | \$8.75 Additions Fee Required | al |
| City & State | | City & State | City & State | | 6 Floation Compaign Floating | | |
| 23 | | 28 | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | ' | |
| Zip | | | Country | | 8. This corporation owes or has paid th | | |
| 24 | 25 | 29 30 | | | Personal Property Tax due June 30. | | |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent | | | | | | | |
| PEREZ-PADILLA, MANUEL 81 Name | | | | | | | |
| 3231 S.W. 16TH TERRACE MIAMI FL 33145 | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | |
| | | | | 30(710010 | as (F.O. Box Hambor to Hot Moodplable) | | _ |
| | | | 83 | | | | |
| ! | | | 84 Cit | | | 85 Zip Code | |
| | | | | y | | FL S Zip Code | |
| 11. Pursuant I | to the provisions of Sections 607.0 | 502 and 607.1508, Florida Statutes | s, the above-nar | ned corpo | ration submits this statement for the purpo | ose of changing its registe | ed |
| 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 lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | |
| SIGNATURE | | | | | | | ì |
| | Signature, typod or printed name of registered in | | Registered Agent sign | ature required | | ATE | |
| 12. | PD OFFICERS A | AND DIRECTORS DELETE | 13. | | ADDITIONS/CHANGES TO OFFICERS | | |
| TITLE | PEREZ-PADILLA, MANUEL | ☐ peceie | 1.1 TITLE | | | ☐ Change ☐ Add | dition |
| NAME | 3231 S.W. 16TH TERR | | 1.2 NAME | } | | | ł |
| STREET ADDRESS | AMARIN EL | | 1.3 STREET ADDRA | :SS | | | |
| CITY-ST-ZIP TITLE | MIN 11 C | DELETE | 1.4 CITY-ST-ZIP 2.1 TITLE | | | Change Add | dition |
| NAME | | | 2.2 NAME | | | | 1111011 |
| STREET ADDRESS | | | 2.3 STREET ADDR | | | | - 1 |
| | | | 2.4 CITY-ST-ZIP | .55 | | | |
| CITY-ST-ZIP | | | 3.1 TITLE | | | Change Add | dition |
| NAME | | | 3.2 NAME | ĺ | | | |
| STREET ADDRESS | | | 3.3 STREET ADDRI | ss | | | |
| CITY-ST-ZIP | | | 3.4. CITY-ST-ZIP |] | | | - 1 |
| TITLE | | DELETE | 4.1 TITLE | | | Change Add | dition |
| NAME | | | 4. 2 NAME | | | · | ļ |
| STREET ADDRESS | | | 4.3 STREET ADDR | ss | | | |
| CITY-ST-ZIP | | | 4.4 CITY - ST - ZIP | ĺ | | | [|
| TITLE | | DELET E | 5.1 TITLE | | | Change Add | noilit |
| NAME | | | 5.2 NAME | | | | |
| STREET ADDRESS | | | 5.3 STREET ADDRE | ss | | | - (|
| CITY-ST-ZIP | | | 5.4 CITY - ST - ZIP | | | | |
| TITLE | | DELETE | 6.1 TITLE | | | Change Add | dition |
| NAME | | | 6.2 NAME | | | | ĺ |
| STREET ADDRESS | | | 6.3 STREET ADDRE | ss | | | İ |
| CITY-ST-ZIP | | | 6.4 CITY-ST-ZIP | | | | |
| 14 I hereby c | ertify that the information supplied | with this filing does not qualify for | the exemption s | tated in S | ection 119.07(3)(i), Florida Statutes, I furth | er certify that the informat | tion I |

14. Thereby certify that the information supplied with this filling does not quality 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 empwered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if or progression an attachment with an applicas.

---- HALAMAN PORCE POUR

3/3 /98