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 # F47729

(1)

PETE'S ORNAMENTAL IRON SHOP, INC.

Apr 24 1998 8:00am Secretary of State

FILED



| Principal Place of Business Mailing Address | | | | | | r comitte sier Gider janes semin bifare imit dinni millit dente minit dente dente dente dente |
|---|---|-------------------------------------|---------------|------------|-------------------|---|
| C/O FLOREN | DIO PENEZ ROBENTO PECEZ | C/O FLORENCIO PEREZ 1208E RTO PEREX | | | d lele | & |
| 105 SW 57TH AVE MIAMI FL 33144 | | 105 SW 57TH AVE MIAMI FL 33144 | | | | DO NOT WRITE IN THIS SPACE |
| | | | | | | 3. Date Incorporated or Qualified |
| | | | | | | 10/05/1981 |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | | | 4. FEI Number Applied For |
| 21] | | 26 | | | | 59-2177906 Not Applicable |
| Suite, Apt. : | #, e1C. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired See Regulted |
| City & State | | City & State | | | | ······································ |
| 23 | | 28 | | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| Zip | Country | Zip | Co | Country | | 8. This corporation owes or has paid the current car Intangible |
| 4 | 25 | 29 | 30 | | | Personal Property Tax due June 30. Yes 🔲 No |
| | 9. Name and Address of Current | t Registered Agent | | | , | 10. Name and Address of New Registered Agent |
| | rez, roberto | | | 61 | Name | |
| | SW 57TH AVE | | 82 Street Add | | Street Ad | dress (P.O. Box Number is Not Acceptable) |
| MIA | MI FL 33144 | • | | | | |
| | | | | 83 | • | |
| | | | | 84 | City | 85 Zip Code |
| | | | | | | |
| office or re | ecistered agent, or both, in the State of | of Florida, Such change was | s authorize | ed by | the corpor | orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered |
| agent. I ar | n familiar with, and accept the obliga | tions of, Section 607.0505, I | lorida Sta | tutes | 3. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| SIGNATURE | | | | | | quired when reinsjating) DATE |
| 12. | Signature, typed or printed name of registered agen OFFICERS AND | | 13. | <u>_</u> _ | ent signature red | Quirod when reinslating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | PT | DELETE | 1.1 T | | T | Change Addition |
| NAME | PEREZ, ROBERTO | | · · | IAME | | - - |
| STREET ADDRESS | -3045 9W 5TH TERR | | 1,3 5 | TREET | ADDRESS | 105 6W 57TH AUE MLAMI FL 33149 |
| CITY-ST-ZIP | MIAMI, FL-0- | | 1 | ity-\$ | T-ZIP | MIAWI FI 33144 |
| TITLE | | DELETE | | 2.1 TITLE | | Change Addition |
| NAME | | | 2.2 N | 2.2 NAME | | |
| STREET ADDRESS | | | 2.3 STREET AD | | ADDRESS | |
| CITY-ST-ZIP | <u> </u> | | 2.4 | CITY - S | 37 - ZIP | |
| TITLE | | DELETE | 3.1 T | ITLE |] | Change Addition |
| NAME | | | 3.2 N | IAME | | |
| STREET ADDRESS | | | 3.3 \$ | TREET | ADDRESS | 1 |
| CITY-ST-ZIP | | ···· | | CITY-S | ST-ZIP | |
| TITLE | | DELETE | 4.1 T | ITLE | - 1 | Change Addition |
| NAME | | | 4.21 | NAME | | |
| STREET ADDRESS | | | ı | | ADDRESS | |
| CITY-ST-ZIP | | Decem | | 17Y-\$1 | T-ZIP | |
| TITLE | | ☐ DELETE | | 5.1 THE | | Change Addition |
| NAME | | | 5.2 N | | | |
| STREET ADDRESS | | | | | ADDRESS | |
| CITY-ST-ZIP | | DELETE | | ITY-ST | 1-ZIP | D Channel D 44 201- |
| TITLE | | [] Dittell | 6.1 1 | | | Change Addition |
| NAME | | | 6.2 N | | | 1 |
| STREET ADDRESS | | | | | ADDRESS | |
| CITY-ST-ZIP | | | 6.40 | ITY-SI | T-ZIP | |

I. 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: VI JOK TO LONG

4/20/18 266-1861