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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90098 005 ***150.00

1999 DIVISION OF CORPORATIONS					02-27-1999 90098 005 ***150.00					
DOCUN 1. Corporation	MENT # F78641					` 				
LADEX C	CORPORATION									
			 _							
Principal Place	of Business	Mailing Address		_		t immilian this immat ratio asse	Elfet Hat miåte erne		•., 5.5., (52,	
7231 SW 63RD	AVE	7231 SW 63RD AVE								
SUITE 200		SUITE 200 MIAMI FL 33143				DO NOT WRITE IN THIS SPACE				
MIAMI FL 33143 US		US				3. Date Incorporated or Qualifed				1
••		*-				05/03/1982	•			ĺ
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		App	lied For	
21		26				59-1883148		Not	Applicable	1
Suite, Apt.	#. etc	Suite, Apt. #,_etc,				5. Certificate of Status Desired	·	.\$8 <u>.</u> 75.∧		
22		27	_					Fee Red	<u> </u>	ł
City & State	е	City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zip	Country	Zip Country				8. This corporation owes the current year Intangible				
24	25		30			Personal Property Tax.			□No	ł
	9. Name and Address of Current	Registered Agent		Od Na		10. Name and Address of New	v Registered A	gent		İ
l uon	CIDA DOMINGO D		ļ	81 Nar	1e]
MOREIRA, DOMINGO R 7231 SW 63RD AVE				82 Stre	et Addr	ess (P.O. Box Number is Not Acce	ptable)			İ
SUITE 200				83						ł
MIAMI FL 33143				83						
INICAN	MI FE 30143		•	84 City			FL	85 Zip C	ode	
		1 007 4500 Fly 11- Ct-14						anning its	registered	┨
l office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	nt Florida. Such change was a	umorizea	ny the c	ed corporation	oration submits this statement for a in's board of directors. I hereby ac	cept the appoint	ment as reg	istered	
SIGNATURE								:		1
	Signature, typed or printed name of registered agent			tered Agent signature required		ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECT			2S IN 12	í
12.	OFFICERS AND	DELETE	13.			ADDITIONS/CHANGES TO	DEFICE NO AND	Change	Addition	11/08
TITLE	VD PREMINA O		1.2 NA							
NAME	MOREIRA, BRENDA O 7231 SW 63RD AVE SUITE 200			ME REET ADDRI	ee					2037
STREET ADDRESS	MIAMI, FL 00000			Y-ST-ZIP	.33			:] i
CITY-ST-ZIP TITLE	PD	DELETE	2.1 TIT					Change	Addition	2
NAME	MOREIRA, DOMINGO R	_	2.2 NA					."		
STREET ADDRESS	7231 SW 63RD AVE SUITE 200		2.3 STREET ADDR		ss					
CITY-ST-ZIP	MIAMI, FL 00000			TY-ST-ZIP				·		
TITLE	TD	X DELETE	3.1 111		TI)		X Change	Addition	
NAME	BOGERT, ALBERT D		3.2 NA	ME	Lo	pez-Ibanez, Robe	erto E.		•]
STREET ADDRESS	7231 SW 63RD AVE SUITE 200		3.3 STREET ADO		ss 72	31 SW 63rd AVE	Suite 20	0		ļ
CITY-ST-ZIP	MIAMI FL		3.4. Cr	ry-ST-ZiP	Мi	ami FL				1
TITLE	SD	☐ DELETE	4.1 TITLE					☐ Change	☐ Addition	{
NAME	BRU, RAFAEL I		4. 2 NA	ME		•				
STREET ADDRESS			4.3 ST	4.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI FL			4.4 CITY-ST-ZIP					(A) 12 1 1 1 1 1 1 1 1	1
TITLE		DELETE	5 1 TIT					Change	Addition	
NAME	- .	سيحسيان د	5.2 NA	ME REET ADOR	_				فيستحيب سيسسب	1
STREET ADDRESS			1			**				
CITY-ST-ZIP		C priete	5.4 CIT	Y-ST-ZIP				Change	☐ Addition	1
TITLE		☐ DELETE	0.1 171	LL:				change	Addition	1

64 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this fill g 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 points 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 of the facelver or used 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 over a particular an address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

WIRED