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

**PROFIT** CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # F90420



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State **DIVISION OF CORPORATIONS** 

## Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90078 041 \*\*\*150.00

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DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  07/13/1982			
Applied For			
Not Applicable			
.75 Additional ee Required			
.00 May Be			
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82 Street Address (P.O. Box Number is Not Acceptable)			
84 City FL 85 Zip Code			
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
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F 5 W le e t l			

DELETE 3.1 TITLE TITLE PLA. RAUL H 3.2 NAME NAME 6535 SW 52ND TERR STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 3.4. CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition TITLE VTSD 4.1 T/TLE NAME PLA, CARMEN S. 4.2 NAME 9500 NW 12ST.,#35 STREET ADDRESS 4.3 STREET ADDRESS **MIAMI FL 33172** 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY+ST-ZIP CITY-ST-ZIP ☐ DELETE 6.1 TITLE Change Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

SIGNATURE:

<sup>14.</sup> 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, with all other like empowered.