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

PROFIT CORPORATION ANNUAL REPORT 1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G38596

(4)

2001 SALES, INC.

Principal Place of Business	Mailing Address
7851 SW 133 CT	7851 SW 133 CT
Miami Fl 33183	MIAMI FL 33183

FILED Mar 23 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/16/1983 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 Not Applicable 59-2401298 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LOPEZ, FRANK 7851 SW 133 CT Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33183** 83 84 City 85 Zip Code FL 11. Pursuant to the provisions of Soctions 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered

office or re agent. I as	egistered agent, or both, in the State of Florida. S In familiar with, and accept the obligations of, Sec	uch change was au clion 607.0505, Flori	thorized by the corp da Statutes	oration's board of directors. I hereby accept the appointment as registered	ď
SIGNATURE	Signature, typed or printed name of ingestered agent and life if appl	Incubia /NOYE	Registered Agent signature	required when reinstating) DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	_
TITLE	VP	DELETE	1.1 TITLE	Change Addit	tion
NAME	LOPEZ, GEMA		1.2 NAME		
STREET ADDRESS	7851 SW 133 CT		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY - ST - ZIP		
TITLE	P	DELETE	2.1 TITLE	Change Addit	tion
NAME	LOPEZ, FRANK		2.2 NAME		
STREET ADDRESS	7851 SW 133 CT		2.3 STREET ADDRESS	•	
CITY - ST - ZIP	MIAM1,FL 00000		2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TOTLE	Change Addit	tion
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3 4. CiTY-ST-ZiP		ŀ
TITLE		DELETE	4.1 TITLE	Change Addit	tion
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE	Change Addit	ion
NAME			5.2 NAME		1
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DEL€TE	6.1 TITLE	☐ Change ☐ Addili	ion
NAME			6.2 NAME		Ì
STREET ADDRESS			6.3 STREET ADDRESS		Ī
					- 1

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 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 pri an attachment with an address.

SIGNATURE:

SIGNATURE: