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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS** 

1998 DOCUMENT # H0793
1. Corporation Name
CORPORATE GENERAL #8, INC.

(1)

**FILED** Mar 04 1998 8:00am Secretary of State

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Principal Place	e of Business	Mailing Address				- I smalati mets ambit santa tahun tetiba ettit minit ather dente dente ather ment ment ment ment		
4224 HOLLYV		4224 HOLLYWOOD BLVD.						
HOLLYWOOD FL 33020		HOLLYWOOD FL 33020						
						DO NOT WRITE IN THIS S	SPACE	
						3. Date Incorporated or Qualified 06/14/1984		
2. Principal Pi	lace of Business	2a. Mailing Address				4. FEI Number	I A	oplied For
21		26				59-2440686		ot Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.					<del></del>	Additional
22		27				5. Certificate of Status Desired		equired
City & State	9	City & State				8. Election Campaign Financing		
23		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Col	intry		8. This corporation owes or has paid the curr		
24	25	<b>⊢</b>	30					No I
27	9, Name and Address of Curren		30]	;	<del></del>	10. Name and Address of New Registered		
PO.	ORIGUEZ, PEDRO			81	Name		1,0000	
	44 FILLMORE ST.	•						
				82	Street Ad	ldress (P.O. Box Number is Not Acceptable)	,	
nu	XLLYWOOD FL 33019							
				83				
				84	City	ine i	85 Zip	Code
				Ш		FL		
office or re agent. I a	to the provisions of Sections 607.050. egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 607.1508, Florida Statute of Florida. Such change was a ations of, Section 607.0505, Flor	is, the a uthorize rida Sta	bove d by tutes	the corpor	prporation submits this statement for the purpose of ration's board of directors. I hereby accept the app	changing i cintment as	registered registered
SIGNATURE								
	Signalure, typed or printed name of registered age			d Age	ni signature rec	quired when reinstating) DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PO	☐ DELETE	1.1 Titl				Change	Addition
NAME	MYERS, MILTON B.		1.2 N	AME				
STREET ADDRESS	2514 HOLLYWOOD BLVD.		1.3 \$	TREET	ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33020		1.4 0	ITY-SI	T-21P			
TITLE	VST DELETE		2.1 To	2.1 TITLE			Change	Addition
NAME	rodriguez, pedro L.		2.2 N	AME				
STREET ADDRESS	1244 FILLMORE ST.		2.3 \$	TREET	ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33019		2.40	ary-s	IT-71P			
TITLE	☐ DELETE			3.1 TITLE			☐ Change	Addition
NAME			3.2 N	AME	-		=	
STREET ADDRESS					ADDRESS			· · ·
CITY+ST-ZIP				ITY-S				1
TITLE		☐ DELETE	4.1 TI		1 411		☐ Change	Addition
NAME			4.2 8				\$.mile	
					4000000			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		☐ DELETE	-	ITY-SI	I-ZIP		Change	Addition
TITLE		☐ DETE IE	5.1 TI				Criange	וופוווטטא נ:
NAME			5.2 N		-			ļ
STREET ADDRESS			5.3 S	TREET.	ADDRESS			
CITY-ST-ZIP		#		ITY-SI	T- ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE		☐ DELETE	6.1 TI	TLE			☐ Change	Addition
NAME			6.2 N	AME				
STREET ADDRESS			6.3 S	TREET.	ADDRESS			

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 on an attachment with an address.