FILED

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90132 034 ***155.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H16225

MENDEZ-LOPEZ INVESTMENTS, INC.

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Principal Place of Business Mailing Address						i ibarait ûtêj ildin ûliye lidin is	Tat Asst Atmit .	TESTE SIBEL SIBEL	#1911 BIB11 1981
201 CRANDON BLVD #1100 PO BOX 441553 MIAMI FL 33144-1553		201 CRANDON BLVD #1100 PO BOX 441553 MIAMI FL 33144-1553			DO NOT WRITE IN THIS SPACE				
US		US		3	Date Incorporated or Qualifed 08/08/1984				
2. Principal P	lace of Business	2a. Mailing Address		•	4	. FEI Number		· A	pplied For
21		26				<u>59-2655 192</u>			ot Applicable
Suite, Apt.	Suite, Apt. #, etc.	etc.			. Certifcate of Status Desired	· 🗆		Additional equired	
City & Stat	9	City & State			6	i. Election Campaign Financing Trust Fund Contribution	X		May Be to Fees
Zip	Country	Zip	Country	,	8	This corporation owes the curr	ent year In	tangible	
24	25	29 30				Personal Property Tax.		Yes	XINo
Name and Address of Current Registered Agent					10). Name and Address of New F	legistered	Agent	
			81	Name					,
HERRERA, ISAAC 9801 S.W. 5TH STREET			82	Street	Address (P.O. Box Number is Not Accepta	able)	-	
MIAI	/II FL 33174		83						
			84	'	, , , , ,		FL	- I i	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									s registered egistered
SIGNATURE									
	Signature, typed or printed name of registered agent			nt signature i	required when	reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AN	ND DIRECTO	ORS IN 12
12.	OFFICERS AND		13.		i	ADDITIONS/CHANGES TO OF	TOETTO AT	Change	Addition
TITLE	PD	C) DECE IE	1.1 TITLE	٠		, ,			
NAME	MENDEZ, GABRIEL		12 NAME			,			
STREET ADDRESS	201 CRANDON BLVD #1100		1.3 STREE		İ			<i>:</i>	
CITY-ST-ZIP	MIAMI FL	C) priett	1.4 CITY-S	T- ZIP				Change	Addition
TITLE	SD	-	2.1 TITLE			•		Crimide	
NAME	DE MENDEZ, LUZ MARIA		2.2 NAME					:	· ·
STREET ADDRESS	201 CRANDON BLVD #1100		2.3 STREE	TADDRESS					į
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-5	ST-ZIP	<u> </u>		_ .	Change	Addition
TITLE	STD	_	3.1 TITLE			المستحدث المستحد		Change	Addition
NAME	DE LOPEZ, ELISA		3.2 NAME						
STREET ADDRESS	201 CRANDON BLVD #1100		33 STREE	T ADDRESS					
CITY-ST-ZIP	MIAMI FL		3.4. CITY-5	ST-ZIP				☐ Change	☐ Addition
TITLE	VP		4.1 TITLE					☐ Criange	
NAME	LOPEZ, LUIS ENRIQUE		4. 2 NAME						
STREET ADDRESS	201 CRANDON BLVD #1100	i	4.3 STREE	TADDRESS	j				
CITY-ST-ZIP	MIAMI FL		4.4 CITY-S	T- ZIP	 				Addition
TITLE		_	5.1 TITLE		İ			☐ Change	Addition
NAME		1	5.2 NAME			X		•	
STREET ADDRESS				T ADDRESS				•	1
CITY-ST-ZIP			5.4 CITY-S	T-ZIP					Addition
TITLE		C DECE !	6.1 TITLE					Change	
NAME			6.2 NAME			•			
STREET ADDRESS			6.3 STREE	T ADDRESS			•		ĺ

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 angual 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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR