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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H69030

(5)

BUCKLE UP, INC. OF MIAMI

FILED Feb 09 1998 8:00am Secretary of State



	OI Dusii 1033	***************************************	g Addiess			(
1500 SAN REI	MO AVE	1500	SAN REMO AVE			į		
SUITE 125		SUITI	SUITE 125 Coral Gables Fl 33146-3054					
CORAL GABLE	ES FL 33146-3054	COR				DO NOT WRITE IN THIS SPACE		
US		US	US			3. Date Incorporated or Qualified	3. Date Incorporated or Qualified	
						07/29/1985		
2. Principal Pla	ace of Business	2a. Ma	ailing Address			4. FEI Number	Applied For	
21		26				59-2560681	Not Applicable	
Suite, Apt. #	l elc		ite, Apl. #, etc.				.75 Additional	
Annual Contract of the Contrac	r, etc.	├	de, Apr. #, etc.				ee Required	
City & State		27	ty & State					
		<u> </u>	y & Siale				5.00 May Be	
23		28		T -0			dded to Fees	
Zip	Country	· ·	,	Coun	ııry	8. This corporation owes or has paid the current ye	_ •	
24	25	29		30		Personal Property Tax due June 30. X Yes	No	
ļ		s of Current Registere	d Agent			10. Name and Address of New Registered Agent		
l .	NUM REGISTERED AC	gents, inc.		8	B1 Nam	ne	i	
1500 SAN REMO AVE				1	82 Street Address (P.O. Box Number is Not Acceptable)			
STE	125			1	Officer induced (1.0. Box industries in the recordinate)			
COF	RAL GABLES FL 3314	46		[8	83			
1				L				
				8	B4 City	F1 ^{[85}]	Zip Code	
11. Pursuant to	the provisions of Section	ons 607 0502 and 607 1	508 Florida Statut	tes the abo	Ove-nam	ed corporation submits this statement for the purpose of chang	ning its registered	
office or re	gistered agent, or both,	in the State of Florida. S	Such change was a	authorized	by the c	ed corporation submits this statement for the purpose of chan- orporation's board of directors. I hereby accept the appointment	ent as registered	
agent. I am	n tamiliar with, and acce	ept the obligations of, Se	ction 607.0505, Fit	onda Statu	iles.			
SIGNATURE _	San Luc Luc de Lucial de la Companya	of registered agent and this if app	tho:	T. Coninto and	A	uro required when reinstating1 DATE		
12.		FICERS AND DIRECTO		13.	Agent signal	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTOPS IN 12	
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		L 33156	☐ DELETE	2. 4 CITY	Y-\$1- <u>ZIP</u> E	VT XX CHARLES N LOUGHLIAS		
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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 of 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 an an attachment with an address.

CIGNATURE.

The 29 1998 30-11/22