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

Mailing Address

MIAMI FL 33165

% SERGIO BATISTA

2403 SW 112TH AVE

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 18, 1999 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

02-18-1999 90139 015 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **H73089**

1. Corporation Name

Principal Place of Business

% SERGIO BATISTA

2403 SW 112TH AVE

SIGNATURE:

MIAMI FL 33165

WEST FLORIDA DETECTIVE BUREAU CORP.

					08/26/1985			
2. Principal P	Principal Place of Business 2a. Mailing Address				4. FEI Number	Ar	oplied For	
21	26				59-2570171	No	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, e		Suite, Apt. #, etc.				\$8,75	Additional	
22	27				5. Certifcate of Status Desired	Fee Re		
City & State City & State				6. Election Campaign Financing	\$5.00	May Bo		
28				6. Election Campaign Financing \$5.00 May Be				
Zip			Country	,	8. This corporation owes the current y	-		
24	25	29	30		Personal Property Tax.	X Yes	□No	
<u>.</u>	Name and Address of Current Registered Agent				10. Name and Address of New Regis			
BATISTA, SERGIO 2403 SW 112TH AVE				Name	:			
				82 Street Address (P.O. Box Number is Not Acceptable)				
				83				
			03		•			
			84	City		85 Zip (Code	
				Ť		FL	ļ	
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 registered								
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.								
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND DIRECTORS 13.		13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Change	Addition	
NAME	BATISTA, SERGIO		1.2 NAME	-				
STREET ADDRESS	OAGO ON AACTILANE		1.3 STREET	ADDRESS				
CITY-ST-ZIP	ANALA CI		1.4 CITY-ST			-		
TITLE	THE STATE OF	☐ DELETE	2.1 TITLE	1-21		[7] Change	Addition	
NAME :			2.2 NAME			onlingo	[_] Addition	
			ľ					
STREET ADDRESS			2.3 STREET	ľ			1	
CITY-ST-ZIP	2.40			T- ZIP				
TITLE			3.1 TITLE		,	Change	Addition	
NAME	32 N		3.2 NAME		angle control		1	
STREET ADDRESS	3.3 \$		3.3 STREET	ADDRESS]	
CITY-ST-ZIP			3.4. CITY-S	T-ZIP				
TITLE	☐ DELETE 4.1 TI		4.1 TITLE			☐ Change	Addition	
NAME	4.21		4. 2 NAME					
STREET ADDRESS	:SS 435		4.3 STREET	ADDRESS			ŀ	
CITY-ST-ZIP			4.4 CITY-ST	-ZIP				
TITLE	☐ DELETE 5.1 TI		5.1 TITLE			☐ Change	☐ Addition	
NAME			5.2 NAME		*			
STREET ADDRESS			5.3 STREET	ADDRESS			ļ	
CITY-ST-ZIP			5.4 CITY-ST	-ZIP			1	
TITLE	☐ DELETE 6.1 TITL					☐ Change	Addition	
NAME		_	6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
			6.4 CITY-ST					
					otion 110 07/2)(i) Floride Statute (5 ml	or oodi6, 45 -4 45 - '-	-formatic -	
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 of director of the corporation of the receiver of 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 edgress, with all other like empowered.								