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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT #

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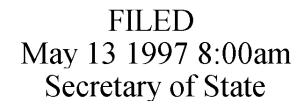
MY LADY CORP.

Principal Place of Business

12190 SW 99TH STREET

Mailing Address

12190 SW 99TH STREET





MIAMI FL 331	96	MIAMI FL 33186-2611							
						3. Date Incorporated or Qualified 04/30/1986		ite of Les 01/199	st Report
21	Place of Business	2a. Mailing Addross 26				4. FEI Number 59-2701929	- 1		Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	S8.75 Additional Fee Required		
City & Stal	te	City & State				Election Campaign Financing Trust Fund Contribution			00 May Be ed to Fees
Zip 24	Country 25	Z _t p	Coun	lry		8. This corporation has liability for in Florida Statutes		tax unde	er s. 199,032,
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Re-	istered	gent	· · · · · · · · · · · · · · · · · · ·
PEC	QUENO TOMAS		ξ.	11	Name				
	90 SW 99TH ST MI FL 33186		8	2	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
1000			Ĩ	3	<u></u>	The second result and the second seco		-	
ı					City		FL		ip Code
office or a agent. I a SIGNATURE	registered agent, or both, in the State am familiar with, and accept the obligation Signature, typod or printed name of registered age	ations of, Section 607.0505, F	aumonzeo Iorida Statul	es.	ne corporauc	oration submits this statement for the pon's board of directors. I hereby acceptions when reinstating)	t the app	ointment	as registered
12.	OFFICERS AN		13.	vgent :	signature require		DATE	DIDECT	000 111 40
TITLE	P	DELETE	1.1 Titul	. 		ADDITIONS/CHANGES TO OFFICE	ENS AND	Chang	
NAME	PEQUENO TOMAS	El wich						L Ulan	is TT Moorgon
STREET ADDRESS	12190 S.W. 99TH ST.		1.2 NAM						
CITY-ST-ZIP	MIAMI FL		1.3 STRE						
TITLE	VPST	DELETE	1.4 C/TY 2.1 T/T/L		ZIP			Chang	ne Addition
NAME	PEQUENO, GLADYS	La beene	2.2 NAM					L., Onang	je 🔲 Addition
STREET ADDRESS	12190 S.W. 99TH ST.		2.3 \$1RE		ODDECC				
CITY-ST-ZIP	MIAMI FL		2. 4 CITY						
TITLE		DELETE	3.1 11110		211			☐ Chanc	e Addition
NAME			3.2 NAM						,
STREET ADDRESS			3.3 STRE	FT AD	OORESS				
CITY-ST-ZIP			3.4 CITY						
TITLE		DELETE	4.1 TITLE					Chang	e Addition
NAME			4. 2 NAM	1E					
STREET ADDRESS			4.3 STRE	ET AD	ODRESS				
CITY-ST-ZIP		'	4.4 City	- ST - Z	ZIP				
TITLE		DELETE	511111					Chang	e Addition
NAME			52 NAM	E				·	-
STREET ADDRESS			53 STRE	DA 13	DRESS				
CITY-ST-ZIP			5.4 DITY	- ST - 7	ZIP				
TITLE		☐ DELETE	61 TITLE		·			☐ Chang	e Addition
NAME			6.2 NAM	Ε				. – •	
STREET ADDRESS			6.3 STRE		DDRESS				
City-ST-ZIP			6.4 CITY						
14	The state of the s		0.4 0111	01-1	<u></u>	· ·			

I do 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 of sustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 507 at 12 months of the corporation of the corporati