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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J69999

(7)

CORAL WAY INVESTMENTS, INC.

FILED Apr 27 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	lailing Address		
311 B W 27 AVENUE		311 S W 27 AVENUE	311 S W 27 AVENUE		
MIAMI FL 33135		MIAMI FL 33135			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					04/22/1987
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For
21		l	26		59-2826025 Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
22		27	27		Fee Required
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23	28		0		Trust Fund Contribution Added to Fees
Zip			Country	ý	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
24	25 Name and Address of Cu		30]		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
04 11					
ENCISO, ROSA MA.					
311 SW 27 AVENUE MIAMI FL 33135			82	Street	Address (P.O. Box Number is Not Acceptable)
IVITE	IMI FL 33133		63	1	
				ļ	leel 7: Oods
			84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida Statutes	s, the abov	e-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					
SIGNATORE	Signature, typed or printed name of registere			ent signature	required when reinstating) DATE
12.	OFFICERS	AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE			1.1 TITLE 1.2 NAME		Circulate Circulate
NAME	A 4 Old OR ALICABLE		1.3 STREET ADDRESS		
STREET ADDRESS	MIAMI FL		1.4 CITY - ST - ZIP		
CITY-ST-ZIP			2.1 TITLE	51-2IF	Change Addition
NAME			2.2 NAME		
STREET ADDRESS	311 SW 27 AVENUE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 2.		2. 4 CITY -	ST-ZIP	
TITLE	*	₽ DELETE	3 1 TITLE		Change Addition
NAME	SALAZAR, MARTA		3.2 NAME		
STREET ADDRESS	I *		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		3.4, CITY-	ST-ZIP	
TITLE	AS	☐ DELETE	4.1 TITLE		T Change Addition
NAME	MUXO, MARIA LUISA		4. 2 NAME		MUXO, MARIA LUISA
STREET ADDRESS				I ADDRESS	
CITY-ST-ZIP			4.4 CITY- 5.1 TITLE	ST - ZIP	MIAMI, FL 33135
TITLE		LJ billin			
NAME OTRECT ANDRESS			5.2 NAME	t address	
STREET ADDRESS			5 4 CITY-		
CITY-ST-ZIP		DELETE	61 TITLE	OT LOU	Change Addition
NAME			62 NAME		
STREET ADDRESS				t address	
CITY+ST-7IP			64 CITY-	ST-ZIP	
14. I hereby			the exem	otion state	ed 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 charged, or open attachment with an address.					
Block 12 or Block 13 if charged, or op in attachment with an address.					