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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K06791

(3)

SAN SILVESTRE, INC.

FILED
May 05 1998 8:00am
Secretary of State

Principal Place of Business		Mailing Address	Mailing Address		
BOTERO, MARIA ELENA		14211 S.W. 97TH AVE			
14211 SW 97TH AVENUE MIAMI FL 33176		14211 SW 97TH AVE MIAMI FL 33176			DO NOT WRITE IN THIS SPACE
US		US			3. Date Incorporated or Qualified
					12/04/1987
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For
21		26			65-0395888 Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired See Regulred
City & State		City & State	City & State		Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip Country		Zip Country		1	8. This corporation owes or has paid the current year Intangible
24	25	29 30			Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent
BOTENO, MANIA ELENA				Name	ue un marchine de la companya de la
	11 SW 97TH AVENUE		82	Street	et Address (P.O. Box Number is Not Acceptable)
MIA MIA	MI FL 33176		83		
			Ľ		
			84	City	FL 85 Zip 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 regis					
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 ag	·		nt signature	sture required when reinstating) DATE
12.	OFFICERS AN	ND DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME	BOTERO, MARIA ELENA	L_J DELETE	1.2 NAME		Change   Addition
STREET ADORESS 14211 SW 97TH AVE			1.3 STREET ADDRESS		ec
CITY-ST-ZIP MIAMI FL			1.4 CITY-ST-ZIP		10 1
TITLE			2.1 TITLE	11-214	Change Addition
NAME	_		2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		ss
CITY-ST-ZIP			2. 4 CITY-	ST - ZIP	
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		ss
CITY-\$T-ZIP			3.4. C(TY-	ST-ZIP	
TITLE		DELETE	DELETE 4.1 TITLE		Change Addition
NAME			/4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		is
CITY-ST-ZIP			4.4 CITY - 9	T-ZIP	
TITLE		DELETE	5.1 TITLE		Change Addition
NAME	•		5.2 NAME		
STREET ADDRESS			5 3 STREET		iS   .
CITY-\$T-ZIP		OCIETE	5.4 CITY - S	T-ZIP	I Oberes II 43300co
TITLE		DELETE	6.1 TITLE		Change Addition
NAME :			6.2 NAME		
STREET ADDRESS			6.3 STREET		,S

14. Thereby certify that the information supplied with this filling 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 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.

SIGNATURE: (2) (24/97 305) 7188883