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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business	Mailing Address
905 NE 4TH AVENUE	805 NE 4TH AVENUE
FT. LAUDERDALE FL 33304	Ft. Lauderdale Fl 33304

FILED Feb 09 1998 8:00am Secretary of State

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Principa! Plac	ce of Business		Mailing A	ddress						
905 NE 4TH AVENUE 905 NE 4TH AVENUE										
FT. LAUDERDALE FL 33304 FT. LAUDERDALE FL 33304								DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified	_1		
									01/19/1988	
2. Principal F	Place of Business		2a. Maifin	g Address					4. FEI Number Applied For	
21			26						65-0033076 Not Applicable	Ð
Suite, Apt	. #, etc.		Suite, Apt. #, etc.						5. Certificate of Status Desired S8.75 Additional	٦
22		27						Fee Required		
City & Stal	te		├ ┐ ′	State					6. Election Campaign Financing \$5.00 May Be	
23			Zip Country				<u> </u>	Trust Fund Contribution Added to Fees		
Zip						intry			8. This corporation owes or has paid the current year Intangible	
24		25 29 30 30 30 30 30 30 30 3		30	1			Personal Property Tax due June 30. Yes No. 10. Name and Address of New Registered Agent	\dashv	
C			iogiatoros z	Acut		61	Nam	e	10. Harris and Address of their registered Agent	\dashv
CARRIO, LOUIS A. 6575 WEST OAKLAND PARK BLVD.									╝	
LAUDERHILL FL 33313						82	Stree	et Addre	ess (P.O. Box Number is Not Acceptable)	
	ODENIET IF OF	010				63				\dashv
										╝
						84	City		FL 85 Zip Code	
11. Pursuant office or agent. I s	to the provisions of registered agent, or am familiar with, and	Sections 607.0502 r both, in the State o decept the obligati	and 607.1508 Florida Suc ons of, Section	3, Florida Stalute h change was a on 607.0505, Flo	os, the al juthorize prida Stat	bove d by tutes	-riamo the co	d corpo orporatio	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered	ī
SIGNATURE										
	Signature, typod or pente	d name of rug-stered agent		tie (NOTE		1 Age	n signati	ito required	ed when reinstating) DATE	j
12.	Т В	OFFICERS AND	DIRECTORS	DELETE	13. 1.13t			1	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	_ {
	CARRIO, LOU	A 21		btttle	1				C Grounds C Northio	ˈ :
NAME Street address		LAND PK.BLVD.	•			1.2 NAME 1.3 STREET ADDRESS				
	LAUDERHILL						'-\$1-7IP			
CITY-ST-ZIP TITLE	0.000			DELETE	2110		1 - 7 IP		☐ Change ☐ Additio	<u>, </u> {
NAME					2.2 N/				Crisings notified	Ï
STREET ADDRESS							ADDRESS	. [
CITY-ST-ZIP					2.40			´		
TITLE	<u> </u>		· · ·	DELETE	3.1 10		1-211		Change Addition	$\overline{\Box}$
NAME	}				3.2 NA					- 1
STREET ADDRESS							ADORESS	;		
CITY-ST-ZIP					3.4. CI					
TITLE				DELETE	4.1 10				Change Addition	n
NAME	•				4. 2 N	AME				
STREET ADDRESS							ADORESS	;		
CITY-ST-ZIP	}				4.4 CI	IY - \$1	- 21P	1		1
TITLE				DELETE	5.1 TIT	LE			Change Addition	ī
NAME					5.2 NA	ME				
STREET ADDRESS					5.3 \$1	REET	ADDRESS	;		
CITY-ST-ZIP					5.4 CI	1Y-S1	- Z IP			
TITLE				DELETE	6.1 11	I.E			Change Addition	Ñ
NAME					6.2 NA	ME				
STREET ADDRESS					6.3 S1	REE L A	ADDRESS			
CITY-ST-ZIP					6.4 CIT	[Y-\$]	- 7 (P			

thereby 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 eath; 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 attackment with an address.