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 # K18984

(0)

PUCKFORD (FLORIDA). INC.

FILED Mar 12 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							
C/O ERNESTO SANCHEZ. ESQUIRE 814 PONCE DE LEON BLVD SUITE 505 CORAL GALBES FL 33134		C/O ERNESTO SANCHEZ. ESQUIRE 814 PONCE DE LEON BLVD., SUITE 505) 5	DO NOT WRITE IN THIS SPACE	
COHAL GALBES	FL 33134	CORAL GALBES FL 33134				3. Date Incorporated or Qualified	٦
						03/24/1988	
2. Principal Plac	e of Business	2a. Mailing Address				4. FEI Number Applied For	4
21		26				65-0040439 Not Applicable	<u>, </u>
Suite, Apt. #, etc.		Suite, Apt. #, etc.				SR 75 Additional	٦
22		[27]				5. Certificate of Status Desired Fee Required	-
City & State		City & State				6. Election Campaign Financing \$5.00 May Be	٦
23		28				Trust Fund Contribution Added to Fees	1
Zip	Country	Zip	Country			8. This corporation owes or has paid the current year Intangible	٦
24	25	29	30			Personal Property Tax due June 30. 🗹 Yes 🔲 No	
	g. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Agent	\Box
SANC	HEZ, ERNESTO			B1	Name		
	PONCE DE LEON BLVD		62 Stree			ddress (P.O. Box Number is Not Acceptable)	4
SUITE				83 Street Au		datess (F.O. Box Notificer is Not Acceptable)	1
	AL GABLES FL 33134						٦
CON	AL GADLES I E 33/34						_
				84	City	FL 85 Zip Code	
11. Pursuant to	the provisions of Sections 607.050 istered agent, or both, in the State	2 and 607.1508, Florida State of Horida, Such change was	utes, the a	bove o by	e-named c	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	
	familiar with, and accept the obliga	ations of, Section 607.0505, I	Florida Sta	tutes).		
SIGNATURE	pature, typed or printed name of repotered agr	nt and title if applicable (No	OTE Registere	d Ape	nt signature re	eguired when reinstating) DATE	_ հ
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	_ 5
TITLE			1.1 T	1.1 TITLE		Change Addition	, <u>;</u>
NAME	LARTITEGUI, JESUS		1.2 N	AME			3
STREET ADDRESS CUMBRES DE CURUMO		1.3 \$		TAEET	ADDRESS		{
CITY-ST-ZIP	CARACAS, VENEZUELA	1.4 (1.4 CITY-ST-ZIP			{2
TITLE	DVP DELETE		2.1 Ti	2.1 TiTLE		Change Addition	١K
NAME	LARTITEGUI, NEKANE		2.2 NAME				1
STREET ADDRESS	CUMBRES DE CURUMO			23 STREET ADDRESS			
CITY-ST-ZIP	CARACAS, VENEZUELA	2		2 4 City-St-ZiP			╛
TITLE		- 4.10.10.10.10.10.10.10.10.10.10.10.10.10.		TLE		Change Addition	ī
NAME			32 N	AME	1		
STREET ADDRESS			335	TREET	ADDRESS		
CITY-ST-ZIP			1		ST-ZIP		
TITLE		DELETE	4.1 T			☐ Change ☐ Addition	٦
NAME			4.21	IAME			
STREET ADDRESS					ADORESS		- 1
CITY-ST-ZIP					T-ZIP		
TITLE		DELETE	5.1 T		+	Change Addition	n
NAME			5.21				
k					ADDRESS		
STREET ADDRESS					T-ZIP		
CITY-ST-ZIP		DELETE			n-zir	Change Addition	ᆏ
TITLE				6.1 TITLE 6.2 NAME			
NAME					ADDOLOG		
STREET ADDRESS					ADDRESS		
CITY-ST-7IP	wife, that the information assembled	illy this films does not availe			T-ZIP	t in Section 119 07(3)(i) Florida Statutes. I further certify that the information	\dashv

Thereby comy mactine information supplies a wint missiling does not quality for the exemption stated in Section 119.07(3)(). Florida Statutes. I further certify that the information this annual report or suppliemental 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 of the cor

Jesus Lartitegui

3/3/98

(305) 441-2040