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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K61586

(9)

THE COSTOYA PARTNERSHIP INC.

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Mar 11 1997 8:00am
Secretary of State
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Delega and Disc	o of Discourses	Mar Cara Andreas					##
Principal Place of Business * DOMINGO H. COSTOYA		Mailing Address			7 1447777		1 0 0 0 0 0 0 0 0 0
	7 AVENUE, SUITE B-105	% DOMINGO H. COSTOYA 8900 S.WL. 117 AVENUE. SUITE 8-105 MIAMI FL 33186					
					3. Date Incorporated or Qualified 01/27/1989	3a. Date of Last F 04/18/1996	Report
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		pplied For
Suite, Apt	# ct	Suite, Apt #, etc			65-0100668	60.75	ot Applicab
2	P ₁ CIG	27			5. Certificate of Status Desired	1 1 7 -	Additional lequired
City & Stat	te	City & State	·		6. Election Campaign Financing	 	May Be
3		28			Trust Fund Contribution		to Fees
⊒Zip "1	Country	Zφ	Country		8. This corporation has liability for in		s. 199.032,
1	25 9. Name and Address of Cu	29	30		Florida Statutes 10. Name and Address of New Reg	Yes No	
····		Tront tregisteres Agent	81	Name	IV. Name and Address of New Neg	Jistereu Agent	
	STOYA, DOMINGO H. 10 SW 117TH ST.					***	
	TE B 105		82	Street Addr	ress (P.O. Box Number is Not Acceptable	le)	
	MI FL 33186		83		79-77-4-41-4-81-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4		
*****			84	City		lor Zin	Codo
				Jriy .		FL 85 Zip	Code
1. Pursuant	to the provisions of Sections 607.	.0502 and 607.1508, Florida St	tatutes, the above-r	amed corp	poration submits this statement for the pr	urpose of changing i	its register
agent La	registered agent, or both, in the S im familiar with, and accept the o	ਸ਼ਬਾਦ ਹਾਂ Florida: Such change w ibligations of, Section 607.050੬	vas autnorized by tr 5, Florida Statutes.	ne corporat	tion's board of directors. I hereby accep	it the appointment as	s registered
SIGNATURE							
		The second secon					
	Signature, type for printed name of registers		(NOTE: Registered Agent	signature requir	F1-5-19-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	DATE	
***************************************	OFFICERS	AND DIRECTORS	13.	signature requir	red when reinstating) ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	
ILE	OFFICERS D		13. 1.1 TITLE	signature requir	F1-5-19-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
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