**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # K82011

1. Corporation Name

MIRETUU	J PUBLISHING, INC.						
Principal Place	of Business	Mailing Address		**	T JEBUSKI GBI IBUS USUN OBSDA VADON ZIDE DIN	At Atlate State grant at	1811 AIBH 1881
%FRANCISCO MIRET %FRANCISCO MIRET							
501 W 28TH ST 501 W 28TH ST					DO NOT WOITE IN T	HE EDACE	
HIALEAH FL 33010 HIALEAH FL 33010					DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed		
					04/10/1989		
Principal Place of Business     2a. Mailing Address					4. FEI Number	Apr	plied For
<del>-</del>	26				65-0084024		t Applicable
Suite, Apt.				•		\$8.75 A	
22	27				5. Certifcate of Status Desired	Fee Re	quired
	City & State City & State				6. Election Campaign Financing	\$5.00	May Be
23	ı <sup>*</sup>				Trust Fund Contribution	Added to	o Fees
			Country		8. This corporation owes the current year	Intangible	
24 25 29 30					Personal Property Tax.		□No
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Register	ed Agent	
A NIDE	T EDANOICOO		81	Name			
MIRET, FRANCISCO				Street Addr	ess (P.O. Box Number is Not Acceptable)		
501 W 28TH ST							
HIALEAH FL 33010			83			• •	
			84	City	· <del></del>	85 Zip C	ode
				,		L	
office or re	egistered agent, or both, in the St	ate of Florida. Such change was auti	norized by	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its pointment as rec	registered gistered
agent. I ai	n familiar with, and accept the ob	ligations of, Section 607.0505, Florid	a Statutes	•			
SIGNATURE					d when reinstating) DATE		
	Signature, typed or printed name of registered		<del></del>	nt signature require	d when reinstating)  ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	PVD	AND DIRECTORS	13.		ADDITIONS/CHANGES TO CIT TOCKE	☐ Change	Addition
NAME	COBOS, ALEX	<u> </u>	1,2 NAME				
STREET ADDRESS	871 SW 104TH CT		1.3 STREET	T ADDRESS			
	A MARIA CI		1.4 CITY-S				}
CITY-ST-ZIP TITLE			2.1 TITLE	1+ZIF		☐ Change	Addition
NAME			2.2 NAME				
	AATER CON ACTURET #400			T ADDRESS			
STREET ADDRESS	2014000 =			ST-ZIP			
CITY-ST-ZIP TITLE			3.1 TITLE	J1-2JF		☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	TADORESS			
			3.4. CITY-S				•
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	TADORESS			
CITY-ST-ZIP			4.4 CITY-S	1			{
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME				l
STREET ADDRESS			5.3 STREET	T ADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	TADDRESS			

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

14. I hereby 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 suppliemental annual report is frie 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 seport 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, with all other like empowered.

**FILED** 

Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90146 030 \*\*\*150.00