SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

(9)

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Jul	16	1998	8:00am
S	ecr	etary	of State

	CORPORATE SERVICES,	INC.				I ERBOGISH AND HENG BINGI BUNG BUNG HINE SHEN BURU BURU BURU	BiBil Julii Albu 1881	
Principal Plac	ce of Business	Malling Address					81811 97811 97811 1881	
848 BRICKELL	AV	848 BRICKELL AV						
202 Miami Fl. 33131		202 Miami Fl 33131	202 MIAMI KI 22121			DO NOT WRITE IN THIS SPACE		
US US						3. Date Incorporated or Qualified		
						06/19/1989		
2. Principal Place of Business		2a. Mailing Addres	2a. Malling Address			4. FEI Number	Applied For	
21		26	26			65-0133734	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.				75 Additional	
22		27				5. Continuos de Grando Desireo E.	e Required	
City & State		<u></u>	City & State				.00 May Be	
23			28			Trust Fund Contribution L Added to Fees		
Zip	Country	Zip	ļ 1	untry		8. This corporation owes or has paid the current year		
24	25 9. Name and Address of Cur	29	30			Personal Property Tax due June 30. Yes	_ UNO	
nro.	·····	ient vedieteien waent		81	Name	10. Name and Address of New Registered Agent		
	LEY, DAVID R		on Name					
	BRICKELL AV			82	Street Addres	dress (P.O. Box Number is Not Acceptable)		
200	H Pi Bosos			83				
MIAN	MI FL 3 3131			"				
				84	City	FL 85	Zip Code	
44 Dames	A to the annual lang of a stine COT O	F02 1 C07 4500 F11-	Di-1	11			9	
11. Pursuant office or	regist ere d agent, or both, in the St	ate of Florida. Such chang	Statutes, the at e was authorize	ove-r	named corpora the corporation	ation submits this statement for the purpose of changing n's board of directors. I hereby accept the appointment	ns registered	
agent. I a	am familiar with, and accept the ob	ligations of, section 607.05	505, Florida Sta	tutes.			•	
SIGNATURE	Signalure, typed or printed name of registered of	poent and little if molecable	(NOTE: Peoist	ared An	uant eignatura raguir	ed when reinstating) DATE		
12.		AND DIRECTORS	13,	<u> </u>	ant agrature requir	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12	
TITLE	PDST							
		I IDEI	ETE 1.1 T	ITLE	3	□ Cha	nge Addition	
NAME	BERLEY, DAVID R.	LJ DELI	ETE 1.1 TI			Cha	nge Addition	
	BERLEY, DAVID R. 1428 BRICKELL AVENUE	LJ DELI	1.2 N	AME	ADDRESS	☐ Cha	inge Addition	
STREET ADDRESS	1428 BRICKELL AVENUE	LJ DELI	1.2 N 1.3 S	AME TREET A	ADDRESS ZIP	Cha	nge Addition	
	1428 BRICKELL AVENUE MIAMI FL		1.2 N 1.3 S 1.4 C	AME TREET A				
STREET ADDRESS CITY-ST-ZIP	1428 BRICKELL AVENUE MIAMI FL AS	DEU	1.2 N 1.3 S 1.4 C	AME TREET A ITY-ST-2 ITLE		Cha		
STREET ADDRESS CITY-ST-ZIP TITLE	142\$ BRICKELL AVENUE MIAMI FL AS ROSADO, AIDA		1.2 N 1.3 S 1.4 C ETE 2.1 TI 2.2 N	AME TREET A ITY-ST-2 ITLE AME				
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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 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 receipt computate empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if the people, if on an attachment with an address.