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FILED

May 01 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L01207 (4)  
1. Corporation Name  
LISY CORP.



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
2620 W. 2ND AVE.  
HIALEAH FL 33010  
US

Mailing Address  
1065 NE 125TH ST.  
SUITE 317  
N. MIAMI FL 33161-5832  
US

3. Date Incorporated or Qualified

07/10/1989

4. FEI Number

65-0150122

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 3400 N.W. 67th Street

Suite, Apt. #, etc.

22 City & State

23 Miami, FL

Zip

24 33147-7553

Country

25 USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

CUAN, MANUEL CHONG, JR.  
8370 W FLAGLER ST  
STE. 248  
MIAMI FL 33144

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME ECHEMENDIA, ALBERICO

STREET ADDRESS 2620 W. 2ND AVE.

CITY-ST-ZIP HIALEAH FL

TITLE VD ☐ DELETE

NAME ECHEMENDIA, MARISEL

STREET ADDRESS 2620 W. 2ND AVE.

CITY-ST-ZIP HIALEAH FL

TITLE SD ☐ DELETE

NAME ECHEMENDIA, MARIO

STREET ADDRESS 2620 W. 2ND AVE.

CITY-ST-ZIP HIALEAH FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition

12 NAME

13 STREET ADDRESS 3400 N.W. 67th Street

14 CITY-ST-ZIP Miami, FL 33147-7553

21 TITLE ☒ Change ☐ Addition

22 NAME

23 STREET ADDRESS 3400 N.W. 67th Street

24 CITY-ST-ZIP Miami, FL 33147-7553

31 TITLE ☒ Change ☐ Addition

32 NAME

33 STREET ADDRESS 3400 N.W. 67th Street

34 CITY-ST-ZIP Miami, FL 33147-7553

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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 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 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 attachment with an address.

SIGNATURE: Alberico M. Echemendia

4/21/98

(305) 836-6001

CR2E034 (10/97)