* FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00											FILED				
PROFIT CORPORATION						FLORIDA DEPARTMENT OF STATE Sandra B. Mortham			Apr 01	1998	8:6)0am			
ANNUAL REPORT 1998					Secretary DIVISION OF C			y of State ORPORATIONS			Secret	tary (of S	tate	
Ç	OCUN	VENT	# L	.05957		(0)									
"		Y ENTE		S, INC.		, ,							*) * d.d.) *		
Į .	incipal Place		ss			ailing Address			•		, 16M110(1 H31 AB101 B11:0 10101 B1	4) 1881 GIBII GIBII	Q4911 PIBIS BII	11) 0) 0 1	
% DAVID QUINTANA 4975 W. FLAGLER					% DAVID QUINTANA 4975 W. FLAGLER						DO NOT W	RITE IN THIS	SDACE		
١ ،	AIAMI FL 331:	34			W	IIAMI FL 33134					3. Date Incorporated or Qualif		STACE		
											07/31/1989		1 14		
2. 21	Principal Pl	ace of Busi	ness		2a. 26	Mailing Address					4. FEI Number NOT APPLICABLE		-	pplied For lot Applicable	
22	Suite, Apt.	Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75	Additional lequired	
23	City & State)			28	City & State					Election Campaign Financir Trust Fund Contribution	9 🔲		May Be I to Fees	
24	Zip		Cour 26	itry	29	Zip	30	Country			This corporation owes or hat Personal Property Tax due	lune 30.	Yes	ntangible No	
		g, Name	and Add	ress of Current	Regis	tered Agent		81	Name		10. Name and Address of Nev	Registered	Agent		
11	MIA	to the provisegistered a	134	ections 607.0502 ott, in the State o	and 6	07.1508, Florida Stat da Such change wa	tutes, th	83 84 se above rized by	City		ration submits this statement for no's board of directors. I hereby a	FL	. ['	Code its registered s registered	
1	agent. I ai IGNATURE	m familiar w	vith, and a	ccept the obligat	ions o	f, Section 607.0505,	Florida	Statutes	i.						
		Signature, type	d or ponted be	me of registered agent					nl sig nature	e required	d when reinstating)	DATE AND	DIDECTO	DC IN 10	
1:	rle	PST		OFFICERS AND	DIREC	DELETE		13. 1.1 TOLE		Т	ADDITIONS/CHANGES TO C	FFICERS AN	Change	Addition	
1	VME	. • .	ANA, DAV	1D				1.2 NAME					-		
ST	REET ADDRESS	4975 W	/. Flagli				1	1.3 STREET	ADDRESS	1					
-	TY-ST-ZIP	MIAMI I	FL			DELETE	_	1.4 CITY-S	T - ZIP	ļ			Channe	Addition	
1	FLE VME	D OHNTA	ANA, DAV	MD.		☐ DELETE		21 TITLE 2.2 NAME					Change	Addition	
	REET ADDRESS		. FLAGLI					2.3 STREET	ADORESS						
Cr	TY-ST-ZIP	MIAMI						2 4 CITY - 5	ST-ZIP						
TI	TLE					☐ DELETE		3.1 TITLE					Change	Addition Addition	
	VM E						- 4	3.2 NAME		İ					
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-	TY-ST-ZIP TLE					DELETE	_	3.4. UITEE 4.1 TITLE) 1 - ZIF	†		 	Change	Addition	
	VME					-		4. 2 NAME							
51	REET ADDRESS							4.3 STREET	ADDRESS						
_	TY-ST-ZIP					[7] notes:		4.4 CITY - S	1-21P	_			Chan	Addition	
1	TLE					DELETE		5.1 TITLE					☐ Change	Addition	
1	NME Treet adoress							5.2 NAME 5.3 STREET	ADDRESS						
	TY-ST-ZIP							5.4 CITY • S		1					
_	11-31-21/ TIF					DELETE		6.1 TITLE		1			Change	Addition	

6.2 NAME

14. Thereby 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 accurate and dress.

6.3 STREET ADDRESS

6.4 CiTY-ST-ZIP

NAME

STREET ADDRESS

SIGNATURE:

CITY - ST - ZIP