FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT #

L07693

(9)

CIFRA EQUIPMENTS AND SYSTEMS, INC.

FILED May 06 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						-{			
11521 S.W. 6	BIST TERRACE	11521 S.W. 81ST TERE	11521 S.W. 81ST TERRACE						
MIAM FL 33		MIAMI FL 33137				DO NOT INDITE		D4.0E	
US		US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
						08/09/1989			1
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		TA	pplied For
21		26				65-0140995			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
27						6. Certificate of Status Desired		Fee R	equired
City & Stat	е	City & State				6. Election Campaign Financing			May Be
23 Zip	Country 7 ip			ntru		Trust Fund Contribution	Ц		to Fees
24	25	29 30			Unity ■ 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No				
24	9. Name and Address of Curre	l l	1301			10. Name and Address of New Reg			
OI.	JIROGA, CARLOS			81 (Name				
11521 SW 81ST TERRACE				82 :	Ctract Addra	ess (P.O. Box Number is Not Acceptab	1-1		
STE 105				82	Street Addre	ss (r.o. box number is Not Acceptable	ie)		i
	AMI FL 33173		ſ	83					
		2 Y	-	84 (City			les Zin	Code
	Z 107				•		FL	'	
11. Pursuant	to the provisions of Sections 607.080	22 and 607,1508, Florida State	utes, the ab	ove-n	named corpo	oration submits this statement for the pu on's board of directors. I hereby accep	urpose of o	hanging it	ts registered
agent. I a	m familiar with, and accept the oblig	ations pt. Section 607.0505, F	lorida Statu	utes.	ne corporatio	in's board of directors. Thereby accept	i tite appo	inunent as	: teðisteren
SIGNATURE						C	7/2	4/58	
12,		nn tan ditte it applicable (NO ID DIRECTORS	DTE: Registered	Agent	signature required	d when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	•	
TITLE	PST	DELETE	1.1 TIT			ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	QUIROGA, CARLOS ALBERT		1.2 NA				•		
STREET ADDRESS	11521 S.W. 81ST TERR			REET AD	nnress				ľ
CITY-ST-ZIP	ANSAAL PA		1	1.4 CITY-ST-ZIP					ľ
TITLE			21 111	··-				Change	Addition
NAME	QUIROGA, CARLOS ALBERTO		2.2 NA	2.2 NAME					- 1
STREET ADDRESS	11521 S.W. 81ST TERR		2.3 STI	2.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL		2.4 CI	2.4 CITY-ST-ZIP					
TITLE			3.1 TIT	LE			[Change	☐ Addition
NAME	ESPINOSA, LUIS ENRIQUE		3.2 NAI						
STREET ADDRESS	11521 SW 81 TERR.			reet ad	· ·-				
CITY-ST-ZIP	MIAMI FL	DC: CYC		1Y-\$I-	ZIP			Charac	Addition
TITLE		☐ DELETE	4.1 T(T)				L	Change	☐ Addition
NAME OTREET ADDRESS			4. 2 NA						
STREET ADDRESS				REET AD					
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TiT	Y-ST-2 L£	ar			Change	Addition
NAME			5.2 NA		}		•		_
STREET ADDRESS				REET AD	DRESS				
CITY-ST-ZIP				Y-ST-2					
TITLE		☐ ĐEL Ē TĒ	6.1 TIT					Change	Addition
NAME			6.2 NA	ME	1				
STREET ADDRESS			6.3 STF	REET AD	ORESS				
CITY-ST-ZIP				Y-ST-2		<u> </u>			
14. I hereby of Indicated	certify that the information supplied von this annual report or supplement	vith this filing does not qualify all annual report is true and ac	for the exer	mptio	n stated #/S	Section 119.07(3)(i), Florida Statutes. I fee shall have the same legal effect as if	urther cert made und	ify that the	information

Interest certify that the information supplied with this falling does not quality for the exemption stated it Section 119.07(3)(i), Florida Statutes. Further certify that it is an indicated on this annual report or supplemental arrival report is true and accurate and that my supplied 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:

-04/24/98 279-8604