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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # L15408

(2)

Principal Place 9360 SW 30 MIAMI FL 331	ONTINENTAL ELECTRON o of Business terr.	\ /			DO NOT WRITE IN THIS 3. Date Incorporated or Qualified 09/08/1989		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	T _{Ar}	oplied For
21		28	26		65-0149818		t Applicable
Suite, Apt.	₩, etc.	Suite, Apt. #, etc.	-		5. Certificate of Status Desired		Additional
City & State		City & State	City & State			Fee Re	
23	ti e e e e e e e e e e e e e e e e e e e	├ ─`1	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	May Be to Fees
Zip	Country Zip		Cou	ntry		wes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30.		No
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Registered	Agent	
936	ELI, FRANCISCO A. 80 S.W. 30TH TERR. AMI FL 33165			83	ress (P.O. Box Number is Not Acceptable)		
SIGNATURE			Blutes, the at as authorized Florida Stati		poration submits this statement for the purpose a tion's board of directors. I hereby accept the ap	_ ' ' ' '	Code Is registered registered
12.	Signature, typed or printed hanse of registered	agreet and lette if applicable (f	NOTE Registered	Agent signature requir	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	IN DIDECTAL	C IN 12
TITLE	P	DELETE	1.1 [1]	I.F.	ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	CUELI, FRANCISCO A. 9360 S.W. 30TH TERR. MIAMI FL 33165		1.2 NA 1.3 ST	ł.			
TITLE		☐ DELETE	2.1 10		There is a well-tip for the second of the se	Change	Addition
NAME			2.2 NA	ME			
STREET ADDRESS			2.3 ST	REET ADDRESS			
CITY - ST - ZIP		- I novere		TY-ST-ZIP			— —
TITLE		☐ DELETE	3.1 TiT	l l		Change	Addition
NAME			3.2 NA				
STREET ADORESS				REET ADDRESS			
CITY-ST-ZIP TITLE	<u> </u>	DELETE	3.4. C) 4.1 T()	TY-ST-Z#P		Change	Addition
NAME			4. 2 N/	L			
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CITY-ST-ZIP			5.4 CIT	TY + ST - ZIP			
TOTLE	· · · · · · · · · · · · · · · · · · ·	DELETE	6.130	IF T		Change	Addition

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 roccine 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 one of the corporation of th

6.4 CITY-ST-ZIP

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADORESS CITY-ST-ZIP E034 (10/97)

FILED

Apr 28 1998 8:00am

Secretary of State