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

LUBE COMPURATION		
Principal Place of Business	Mailing Address	
2588 SW 27TH AVENUE MIAMI FL 33133-9143	2588 SW 27TH AVENUE MIAMI FL 33133-9143	

FILED Apr 06 1998 8:00am Secretary of State

DOCU 1. Corporation	MENT # L19451	(8)			
LCBE (CORPORATION				
Principal Plac	e of Business	Mailing Address		L LOBILOT. ANT TINIS SALL MIND WINDS LINE MINDS	INII MINII AIBIR USNes MINEI 1824
2588 SW 27TH AVENUE 2588 SW 27TH AVENUE					
MIAMI FL 331	133-9143	MIAMI FL 33133-9143		DO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualified	IS OF NOL
				09/29/1989	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0156095	Not Applicable
Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22		27			Fee Required
City & Stat		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Zip 29	Country 30	This corporation owes or has paid the operational Property Tax due June 30.	current year Intangible
	9. Name and Address of Current			10. Name and Address of New Registers	
Mi	YAR, RAMON		81 Name		
25	88 SW 27TH AVENUE		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33133-9143		83			
	•		84 City		land zona
			84 City	F	L 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	tes, the above-named col	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered
agent. I a	am familiar with, and accept the obligat	ions of, Section 607.0505, F	authorized by the corpora lorida Statutes.	ation's board of directors. Thereby accept the a	ppomment as registered
SIGNATURE	Signature, typod or printed name of registered agent	700	TE: Registered Agent signature requ	uired when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DP	☐ DELETE	1.1 TITLE		Change Addition
NAME	BRAVO, VICTORIA E.		1.2 NAME		
STREET ADDRESS	% 2588 SW 27 AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	DVP	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BRAVO, JUAN LUIS		2.2 NAME	• •	
STREET ADDRESS	% 2588 SW 27 AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	T printe	2. 4 CITY - ST - ZIP		
TITLE	DVP	☐ DEL e te	3.1 TITLE		☐ Change ☐ Addition
NAME	BRAVO DE ESCOBAR, ANA L.		3.2 NAME		
STREET ADDRESS	% 2588 SW 27 AVE. MIAMI FL		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DT DT	☐ DELETE	3 4. CITY - ST - ZIP 4 1 TITLE		☐ Change ☐ Addition
NAME	BRAVO DE ISAZA, CLARA M.	F-1 2454.F	4.2 NAME		c.w.gc
STREET ADDRESS	% 2588 SW 27 AVE.		4.3 STREET ADDRESS		
CITY - ST- ZIP	MIAMI FL		4.4 CITY-ST-ZIP		
TITLE	DS	DELETE	5.1 TITLE	····	Change Addition
NAME	BRAVO DE VELEZ, MARIA C.		5.2 NAME		
STREET ADDRESS	% 2588 SW 27 AVE.		5.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		5.4 CITY-ST-7IP		
TITLE	DAS	☐ DELETE	6.1 TITLE		Change Addition
NAME	Bravo de Prieto, Silvia		6.2 NAME		
STREET ADDRESS	% 2588 SW 27 AVE.		63 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		6.4 CITY - ST - ZIP		

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 suppliemental 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 planged, or on an attachment with an address.

3/76/98 (305)444-2218