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

DOCUMENT # 1. Corporation Name

(3)

PIPE 1	FECH CORPORATIO	N		
Principal Place	e of Business	Mailing Address		T TERPHOLISMS TINING TOWN TOWN STOLEN
201 S.W. 6 Miami FL 33 US		201 SW 67H ST Miami FL 33130 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
	ace of Business	2a. Mailing Address		11/13/1989 4. FEI Number Applied For
21 Suite Ant	# ote	26 Suite, Apt. #, etc.		65-015563 Not Applicable \$8.75 Additional
Suite, Apt. #, etc.		27		5. Certificate of Status Desired LJ Fee Required
City & State)	City & State		B. Election Campaign Financing Trust Fund Contribution Added to Fees
23 Zip	Country	28 Zip	Country	Trust Fund Contribution
24	25	29	30	Personal Property Tax due June 30. Yes No
-71		of Current Registered Agent	1901	10. Name and Address of New Registered Agent
2	DPES, PEDRO 330 S.W. 115TH AVENU IAMI FL 33142	E	81 Name 82 Street . 83 84 City	Address (P.O. Box Number is Not Acceptable)
SIGNATURE .	Signature, typed or printed nume of r	ogistered agent and title if applicable (CERS AND DIRECTORS	NOTE. Registered Agent signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME STREET ADDRESS CITY-ST-ZIP	DP LOPEZ, PEDRO 2530 SW 115TH AV MIAMI FL	L_] DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADORESS		☐ DELETE	2 1 TITLE 22 NAME 23 STREET ADDRESS	Change Addition
CITY-S1-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	2. 4 CITY- ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS		DELETE	3.4. City-St-ZiP 4.1 Tifle 4.2 NAME 4.3 STREET ADDRESS	Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	4.4 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS	Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	Change Addition
CHY-ST-ZIP	ertify that the information s	upplied with this filma does not qualit	6 4 CFTY - ST - ZIP	ad 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 trusted 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 on an attachment with an advises.

4-21-98 305-856-3777

FILED

Apr 28 1998 8:00am

Secretary of State