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

L35921

(0)

OPTIMA CORPORATION

FILED Apr 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									i (Attidit san itter siria fota linet mat alan etett asen alat			
15427 SW 54 ST				15427 SW 54 ST								
MIAMI FL 33185				MIAMI FL 33185					DO NOT WRITE IN THIS SPACE			
US				us				-	3. Date Incorporated or Qualified			
									12/13/1989			
2. Principal Place of Business				2a. Mailing Address					4. FEI Number	Applied For	, –	
 1				26					65-0164791	Not Applica		
Suite, Apt. #, etc.				Suite, Apt. #, etc.					— \$8°	75 Additiona		
				27					E Cortitionto at Statue Decired III 7 Total	e Required	'	
City & State				City & State					Election Campaign Financing \$5.	00 May Be		
23				28						ded to Fees	ŀ	
	Zip Country			Zip Country					8. This corporation owes or has paid the current year	r Intangible	\Box	
24	25			29 30				1	Personal Property Tax due June 30. Yes No			
		Address of Curre		ered Agent	11	I			10. Name and Address of New Registered Agent			
R∩I	DRIGHEZ ELO	RENTINO G				81	Nam	е				
rodriguez, florentino G. 15427 SW 54 ST				 .			2 Street Address (P.O. Box Number is Not Acceptable)					
MIAMI FL 33185						82	Stree	- Audies	Siess (F.O. Dox Number is Not Acceptable)			
						83		_				
						84	City		FL ⁸⁵	Zip Code		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere-											red	
office or registered agent, or both, in the State of Torical Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
SIGNATURE												
Signature, typed or printed name of registered agent and title if applicable (fr						Registered Agent signature requ			when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECT	TORS IN 12	!	
12.	- 	OFFICERS AN	ID DIREC	DELETE	111	TIC			ADDITIONS/CHANGES TO OFFICERS AND DIREC		ition	
TITLE	P P	7 0014100		L_ VILLE	1					iigo 🛄 naa		
NAME	RODRIGUEZ, OCTAVIO			1.2 NAM			T ADDOLCC					
STREET ADDRESS	I ==						1.3 STREET ADDRESS 1.4 City-St-Zip				;	
CITY-ST-ZIP	MIAMI FL			DELETE	1.4 C 2.1 T		I - ZIP		☐ Cha	nge Add	ition	
TITLE	A A	T ELODENTINO		C OCCCIE						iigo <u>Li</u> xioo		
NAME	RODRIGUEZ, FLORENTINO G.				2.2 NAME							
STREET ADDRESS	10 101 111 111				2.3 STREET AL			s				
CITY-ST-ZIP	MIAMI FL			·····		4 CHY-ST-ZIP			Cha	nge Add	lition	
TITLE	ST HALLETT FILLS ADOUGD					3.1 TITLE			Olia	יישי בי השיי		
NAME	HALLETT, ELLIS ARCHER			3.2 NAME				.				
STREET ADDRESS	10691 SW 88 ST			3.3 STREET ADDRESS				s				
CITY-ST-ZIP	MIAMI FL			DELETE			ST - ZIP	 	Cha	nge 🔲 Add	ition	
TITLE				DELETE	4.1 T					gc		
NAME					4.21							
STREET ADDRESS							ADDRES:	S				
CITY-ST-ZIP				- Contract			T-ZIP	 -	T Cha	nge 🔲 Add	lition	
TITLE				DELETE	5.11				☐ Cha	iigo ∟i Muu	MOIT	
NAME					5.2 N						1	
STREET ADDRESS							ADDRES:	S			j	
CITY-ST-ZIP				The second			1-2IP			noo T #44	lition	
TITLE				☐ DELETE	6.1 T				Cha	nge 🛄 Add	IIIOII	
NAME					6.2 N							
STREET ADDRESS	ĺ				6.3 \$	TREET	ADDRES	s				
CITY-ST-ZIP					6.4 0	11Y - S	T-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 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, or on an attachment with an address.