FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1	1996 🤏		DIVISION OF CORPORATIONS							
DOCUN 1. Corporation		918	(6)			·				
OGNAB	ENTERPRISES, INC.									
Principal Place	of Business	Mailin	g Address						#	
% EDUARDO	ANTON	% (% EDUARDO ANTON							
1385 CORAL MIAMI FL 331	WAY SUITE 406		5 CORAL WAY SU IMI FL 33145	ITE 406						
MICHII I E OOI	10	with the same of t	mii (Date Incorporated or Qualified 01/22/1990 		of Last Re 1/04/199		
2. Principal Pla	ce of Business		ailing Address			4, FE1 Number	<u>v</u>		Applied For	l
21		26				65-0266313			Not Applicable	1
Suite, Apt. #	, etc.	Sı	iite, Apt. #, etc.			5. Certificate of Status Desired	X		Additional	1
22		27							Required	ł
Oity & State		28	ty & State			 Election Campaign Financing Trust Fund Contribution 			D May Be if to Fees	
Zip	Country	Z ₁	p	Cou	ntry	8. This corporation has liability for	intangible ta		A COMPANIE AND A SECOND OF THE	1
24	25	29		30			□ No			
	9. Name and Address of C	Current Register	ed Agent		81 Name	10. Name and Address of New F	legistered	Agent		
ANITON	EDUARDO									
	IRAL WAY				82 Street Add	lress (P.O. Box Number is Not Acceptat	ole)			
SUITE 40					83					1
MIAMI FI					84 City			85 Zig	Code	1
							FL			ļ
 Pursuant to or registere 	o the provisions of Sections 60 ed agent, or both, in the State o	7.0502 and 607.1 of Florida. Such ch	508, Florida Statut nange was authoriz	tes, the abo zed by the o	ve-named corpo corporation's boa	oration submits this statement for the pu ard of directors. Thereby accept the app	rpose of cha ointment as	inging its re registered	agistered office agent. Lam	
familiar with	n, and accept the obligations o	f, Section 607.050	05, Florida Statutes	S						
SIGNATURE _	Signature, typied or printed name of register	ed agest and little if appli	cate (N	OİE Begistered	Agent signature requir	esti where remediate oji	DA'E] [
12.	OFFICERS AND DIRI					ADDITIONS/CHANGES TO OFFICERS AND DIRECT				Į,
TILLE	PD FDANCICCO I		☐ DELFTE	1 1 1			L	Change	Addition	1
NAME	BANGO, FRANCISCO J 8200 SW 62ND AVE	•		1 2 N						201
STREET ADDRESS C:TY-ST-ZIP	MIAMI FL			1	HEFF ADDRESS TY+ST-ZIP					12
TITLE	III WALL I E		DELETE	2.11		CONTRACTOR OF THE CONTRACTOR O] Change	Addition	5
NAME				22 N	AME		_			
STREET ADDRESS				238	REET ADDRESS					
C:TY-ST-ZIP					1Y-S1-ZIP	MARKET MARKET CONTRACTOR CONTRACT				1
II'LE			☐ DELETE	3 1 T	·		Ĺ	Change	Addition	
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CITY-ST ZIP					TY-SI-ZIP					
TITLE			DELETE	4.11] Change	Addit on	1
NAME				4.2 N	AME					
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CITY - ST - ZIP			F7 051516		1Y-S1-20P				A LINE	1
TITLE			☐ DELETE	5 1 7			L	Change	Addition	
NAME CIUCEL ADDRESS				524						
S'REET ADDRESS CITY-ST-ZIP					TY-ST-ZIP					
TITLE			□ DELETE	6 1 I				Change	Addition	1
NAME			_	62 N				-	_	
STREET ADORESS				63S	FREET ADDRESS					
CITY-ST-ZIP					TY-SI-ZIF					
						for the exemption stated in Section 119 rate and that my signature shall have the				

certify that the minormation indicated on this similar 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 perporation 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 charged, or on an attachment with an address.

SIGNATURE: