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 #

L65478

(4)

FLAME OF LIFE, INC.

FILED Jan 23 1998 8:00am Secretary of State

	ic of the trans-						
Principal Plac	ce of Business	M	ailing Address				ATAK ETEN ÖLDIL SLALI BIĞIL İKANI INĞI
4081 LAGUNA ST			2333 BRICKELL AVENUE, #2610				
CORAL GABLES FL 33146 MIAMI FL 33134							
ļ US						DO NOT WRITE IN	THIS SPACE
ĺ						3. Date Incorporated or Qualified	
A Data and F	N-a of Division		NA-Dimo Adda			04/16/1990	
<u> </u>	Place of Business	├	Mailing Address 4061 LA	C	S	4, FEI Number	Applied For
Suite, Apt.	# alc	26	Suite, Apt #, etc.	4VVV		65-0344412	Not Applicable \$8.75 Additional
22	w, ptc.	27		Sable	•	5. Certificate of Status Desired	Fee Regulred
City & Stat	le .		City & State	3-VIE	3	& Floation Compaign Financing	
23	.•	28	PLORIC	ما		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζίρ	Country		Zip		intry _	8. This corporation owes or has paid	
24	25	29	33146	30	U.S.A.	Personal Property Tax due June 30	· ·
	9. Name and Address of Cu	rrent Regis	tered Agent		<u> </u>	10. Name and Address of New Regis	
FLORES, MANUEL E.					81 Name		
4081 LAGUNA ST					82 Street Add	lress (P.O. Box Number is Not Acceptable)	
CORAL GABLES FL 33146					Street Add	iless (r.o. box nomber is not Acceptable)	
1					83		
[]					04		[5-] 2: O. (
l	,				84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607	.0502 and 6	07.1508, Florida St	atutes, the a	bove-named corp	poration submits this statement for the purp	pose of changing its registered
office or i	registered agent, or both, in the S Im fam iliar with, and a ccept the c	State of Florid Infraations of	da. Such change w Section 607.0505	as authorize . Florida Sta	d by the corpora tutes	tion's board of directors. I hereby accept the	ne appointment as registered
SIGNATURE	•	g	,	· ionou oto		•	}
SIGNATURE	Signature, typed or printed name of registure	d agent and blie	if applicable (NOTE: Registere	d Agent signature requ	red when reinstating)	DATE
12.		AND DIREC	TORS	13.		ADDITIONS/CHANGES TO OFFICER	IS AND DIRECTORS IN 12
TITLE	DPS		☐ DELETE	1.1 TI	īLÉ (☐ Change ☐ Addition
NAME	FLORES, MANUEL E.			1.2 N	AME		
STREET ADDRESS	2333 BRICKELL AVE #2	610		1.3 S	REET ADDRESS		
CITY - ST - ZIP	MIAMI FL			1.4 C	TY-ST-ZIP		
TITLE	DVT		☐ DELETE	2.1 1	ĭL€		Change Addition
NAME	LUNA, MARCELO			2.2 N	AME		
STREET ADDRESS	2350 SW 23 TERR			23\$	REET ADDRESS		l
CITY-ST-ZIP	MIAMI FL			2.40	ITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE			☐ DELETE	3 1 TI	ILE		Change Addition
NAME				3 2 N	AME		
STREET ADDRESS				3.3 \$	REFT ADDRESS		
CITY-ST-ZIP					ITY-ST-ZIP		·
TITLE			L DELETE	4.1 TI	TLE		Change Addition
NAME				4 2 N	AME		
STREET ADDRESS				4.3 S	HEET ADDRESS		
CITY-ST-ZIP				4.4 C	TY-S1- <i>Z</i> IP		
T≀TL€			DELETE	5.1 71	ILE		Change Addition
NAME				5.2 N	AME	/	
STREET ADDRESS				538	REFT ADDRESS		11 1127
CITY+ST-ZIP				5.4 0	1Y-S1-2IP	/	U/
TITLE	-		DELETE	6.1 Tr	ſL€		Change Addition
NAME				6.2 N	uME .	200002403 -01/23/9801019	プロドビ 1 001
STREET ADDRESS				6.3 ST	REET ADDRESS	-U1/23/38U1U13)ONT
CITY-ST-ZIP	·			64 C	TY-ST-7IP	***150.00	

14. Thereby certify that the information supplies 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 supplies ental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 changed, or on an attachment with an address.

SIGNATURE:

(305) 448-9955