

#61-25
FILE NOW: ~~FILING FEE AFTER MAY 1ST IS \$550.00~~ **AMENDED**

PROFIT CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L 70025
1. Corporation Name
SAL'S ABATEMENT CORPORATION

Principal Place of Business
301 NW 36th STREET
MIAMI, FL 33127-1146
US

Mailing Address
301 NW 36th STREET
MIAMI, FL 33127-1146
US

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

DELLUTRI, SALVATORE
301 NW 36th STREET
MIAMI, FL 33127

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 registered office or registered agent, or both, in the State of Florida. 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

12. OFFICERS AND DIRECTORS	
TITLE	P
NAME	DELLUTRI, SALVATORE
STREET ADDRESS	225 NE 175 ST
CITY-STATE-ZIP	N MIAMI BEACH FL
TITLE	STD
NAME	DELLUTRI, MARIA ELENA
STREET ADDRESS	225 NE 175ST
CITY-STATE-ZIP	N MIAMI BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/02/1990

4. FEI Number
65-0193276

5. Certificate of Status Desired ☐ Applied For ☐ Not Applicable

6. Election Campaign Financing ☐ \$8.75 Additional Fee Required

7. Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax ☐ Yes ☐ No

10. Name and Address of New Registered Agent

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	CEO/CFO
12 NAME	DELLUTRI, MARIA ELENA
13 STREET ADDRESS	225 NE 175 ST
14 CITY-STATE-ZIP	N MIAMI BEACH, FL
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY-STATE-ZIP	
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY-STATE-ZIP	
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY-STATE-ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-ZIP	

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B. 4/6/99 99A2

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a) 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 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, with all other like empowered

SIGNATURE: Maria Elena Dellutri MARIA ELENA DELLUTRI 3/15/99 (305) 576-8866

CR2E034 (11/98)