## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sangra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Principal Place of Business  C/O LOURDES FERNANDEZ 761 EAST OKEECHOBEE ROAD HALEAH FL \$3010-5845  (U)  (U)  (U)  (U)  (A)  (A)  (A)  (A)					
MALEAN FL W	3010	HIALEAH FL 33010-5845		3. Date Incorporated or Qualified 05/07/1990	<b>3a.</b> Date of Last Report <b>07/25/1996</b>
2. Principal Place of Business		2a. Mailing Address		4. FLI Number	Applied For
		26		65-0195664	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	•	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	[25] 9. Name and Address of Curren		30	Florida Statutes  10. Name and Address of New Rec	Yes No
FFA	NANDEZ, LOURDES	it negleteled Agent	81 Nanya	/ / / / / / / / / / / / / / / / / / /	ristered Agent
	EAST OKEECHOBEE ROAD		<b>82</b> Sirect 8	eicla Valdes	
	EAH FL 33010		62 Street A	ddress (P.O. Box Number is Not Acceptable	chobee Rd
			83		
•			84 City	, / ,	FI 85 Zip Code
				WINLEAL	
		2 and 607.1508, Florida Statute of Florida. Such change was a ations of, Section 607.0505, Flo	es, the above-hamed culthorized by the corporida Statutes.	orporation submits this statement for the proration's board of directors. I hereby accep	urpose of changing its registered the appointment as registered
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable (NOTE	: Registered Agent signature r	equited where reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PO ALEIDA	☐ DELETE	1.1 TITLE	Plo/s/T ALEIDA UUIDE 761 E OKUUCHOB	Change Addition
NAME	VALDES, ALEIDA 2261 WEST 53RD ST. APT.4		1.2 NAME	ALEIDA 1/4/de	5 Healast Fe
STREET ADDRESS	HIALEAH FL		1.3 STREET ADORESS	THE AKOUChah	. ed 33010
CITY-ST-ZIP	810	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	161 C VICE CONO.	☐ Change ☐ Addition
NAME	FERNANDEZ, LOURDES		2.2 NAME		
STREET ADDRESS	2778 WEST 60TH ST.		2.3 STREET ADDRESS		
CITY-SI-ZIP	HIALEAH FL		2 4 CITY ST ZIF		
TITLE		☐ DEL€1E	3 1 7011.6		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADORESS		
CITY-ST-ZIP		Total City	3.4 CHY-ST-7IP		
TITLE		DELETE	4 1 TITLE		☐ Change ☐ Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 C(1Y - ST - 7)P 5.1 YILE		Change Addition
NAME			5.2 NAME	<b>-</b>	
STREET ADDRESS			5 3 STREET ADORESS	70000088	1251772
CITY-ST-ZIP			54 CITY-S1-7IP	-06/16/	1/01022025
TITLE	· · · · · · · · · · · · · · · · · · ·	DELLTE	6.1 TITLE	****165	FUU 「世代版版』 もり」 Quan
NAME	•		6.2 NAME	6.1	Ma
STREET ADDRESS			6.3 STREET ADDRESS	6.1	, "KY"
0.74 01 700			0.4.0(1)4.0(1.7)0	'4	2. ~ ·

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes. I fuglier 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 eath; that I am an officer or director of the corporation or the receiver or Irustee 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.

Jun 16 1997 8:00am

Secretary of State