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 # L73008

(9)

OPERATING SERVICES, INC.

Principal Place of Business Mailing Address

FILED Apr 28 1998 8:00am Secretary of State



/BOSO/ WW/SORD STAFET! NOOV		Mary Flagase/		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/11/1990				
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Ar	plied For
21 5601	N.W. 72nd. Avenue	26 5601 N.W.	72nd. A	venue	65-0196147		No	t Applicable
Sulte, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional
22		27			5. Certificate of States Desired	' L.	Fee Re	beriupe
City & State		City & State			6. Election Campaign Financin	۱g	\$5.00	May Be
	I, FLORIDA				Trust Fund Contribution		Added t	to Fees
Zip	Country	Zip	Country		8. This corporation owes or ha		_ ′	- · ·
24 3316	6 25 Miami-Dade	29 33166	30 Miami	-Dade	Personal Property Tax due	·		No
	9. Name and Address of Curren	t Hegistered Agent	81	Name	10. Name and Address of New	v Registered /	Agent	
AUSTIN, PICHARD B//				rvanne	JOSE A. HERMIDA			!
8,30	RO YUNA YORUU (SA REC I		82	Street Addr	ess (P.Q. Box Number is Not Acce	ptable)		
	INTE/300, ADOHESTER BLOG.		83		5601 N.W. 72nd. 1	wenue		
,MAUNIVEL/33/166//			83			-		
	1.1	4 /3 /00	84	City	.117.1.147		85 Zip (Çode
44 6	** RESIGN	ED 4/1/98			MIAMI	<u> </u>	3316	56
office or r	to the provisions of Sections 607,050; egistered agent, or both, in the State in familiar with, and scept the obliga	z and 607.1508, Florida Statu of Florida. Such ch ange y as	ies, the above- authorized by t	nameo corp he corporat	ion's board of directors. I hereby a	the purpose of accept the app	changing its ointment as	s registered
agent. I a	m familiar with, and locept the obliga							- 1
SIGNATURE	Signature, typed or pripried name of registried area	cronyy.	TE: Registered Agent	A. Hern		4/02 DATE	/98	
12.	OFFICERS AND		13.	arginatore regul	ADDITIONS/CHANGES TO C		DIRECTOR	RS IN 12
TITLE	DPS	DELETE	11 TITLE				Change	Addition
NAME	HERMIDA, JOSE A.		1.2 NAME					l l
STREET ADDRESS	5601 NW 72 AVE		1.3 STREET A	DDRESS				1
City-St-ZiP	MIAMI FL		1.4 CITY-ST-	ZIP				
TITLE		DELETE	2.1 TITLE			,	Change	Addition
NAME			2.2 NAME					ļ
STREET ADDRESS			2.3 STREET A	DDRESS				}
CITY-ST-ZIP			2.4 CITY-ST	-ZIP				
TITLE		☐ DELETE	3.1 TITLE				Change	Addition
NAME			3.2 NAME	ĺ				ĺ
STREET ADDRESS			3.3 STREET A	DDRESS				
CITY-ST-ZIP			34. CITY-ST-	ZIP				
TITLE		☐ DELĒTE	4.1 TITLE			<u> </u>	Change	☐ Addition
NAME			4. 2 NAME	J]
STREET ADDRESS			4.3 STREET A	DORESS				
City-St-ZiP			4.4 CITY - ST-	ZIP			TT	
TITLE		☐ DELETE	5.4 TITLE	1			L Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET A	DDRESS				}
CITY-ST-ZIP		T 1.5.55	5.4 CITY-ST-	ZIP			T- 2	
TITLE		☐ DELETE	6.1 TITLE				☐ Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET AL	DDRESS				

14. Thereby 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 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 officer or director of 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 officer or director of 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 officer or director of the corporation of 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 officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information in the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information in the corporation or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information in the corporation or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information in the corporation or trustee empowered to execute that the information in the corporation or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certifies the corporation of the receiver of the