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 # L80967

(7)

LUIS A. SEGARRA, P.A.

FILED
Jan 29 1998 8:00am
Secretary of State

EH ED



Principal Place of Business Mailing Address					I IABILALI AAL IBILI ABILA IBILI BILILI III	101 01011 01011		411 41011 1001
5825 SUNSET DR 5825		5825 SUNSET DR	·					
		SUITE 300						
S MIAMI FL 33143		S MIAMI FL 33143		DO NOT WRITE IN THIS SPACE				
US		U\$			3. Date Incorporated or Qualified 06/18/1990			
2. Principal Place of Business 2a. Mailing Addr					4. FEI Number		A	pplied For
21		26			65-0201954		N	lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			* Codificate of Status Decimal		\$8.75	Additional
27		27	7		5. Certificate of Status Desired	ш	Fee F	tequired
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be
23		28		Trust Fund Contribution		Added	to Fees	
Zip	Country	Zip	Co	untry	8. This corporation owes or has p	aid the cur	rent year Ir	ntangible
24	25 29 30			Personal Property Tax due June 30. 🔲 Yes 🔲 No				
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New R	egistered	Agent	
TOF	RRES, GREDNA M			81 Name				
582	5 SUNSET DRIVE			B2 Street Ac	ddress (P.O. Box Number is Not Accepte	ble)		
SUITE 300				JI SI GOL AC	adipas (i .O. Box Nambol is Not Noopla	510)		
SOUTH MIAMI FL 33143				63				
				24 00			lant w.	0-4-
				84 City		FL	85 Zip	Code
11. Pursuant to	o the provisions of Sections 607.050	2 and 607.1508. Florida Stat	utes, the a	I I bove-named co	orporation submits this statement for the	DUITOOSO O	f changing	its registered
office or re	gistered agent, or both, in the State	of Florida. Such change was	authorize	d by the corpo	ration's board of directors. I hereby acce	pt the app	ointment a	s registered
agent. i an	n terminar with, and eccept the oblig.	arons or, section 607.0303, r	TIDITUA SIA	ilules.		141	م و	
SIGNATURE 2	Signature, types or printed hame of registered age	ant and title if applicable (No	OTE: Booister	ed Agent signature re	quired when reinstating)	DATE		
12,		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTO	RS IN 12
TITLE	PST	☐ DEL ET E	1.11	ITLE			Change	☐ Addition
NAME	SEGARRA, LUIS A		1.21	IAME				
STREET ADDRESS	5825 SUNSET DR. SUITE 300	0		TREET ADDRESS				
CITY-ST-ZIP	S. MIAMI FL			ITY-ST-ZIP				ľ
TITLE	D	DELETE	2.11				Change	Addition
NAME	SEGARRA, LUIS A		221	IAME	•			j
STREET ADDRESS	5825 SUNSET DR. SUITE 300	0		TREET ADDRESS				
CITY-ST-ZIP	S. MIAMI FL	•		CITY-ST-ZIP				
TITLE		DELETE	3.1 T				Change	Addition
NAME				IAME				
STREET ADDRESS				TREET ADDRESS				
				CITY-ST-ZIP				
CITY-ST-ZIP TITLE		DELETE	4.1 1				Change	Addition
NAME				NAME			_ •	
ł				TREET ADDRESS				
STREET ADDRESS			i i	SITY-ST-ZIP				
TITLE		DELETE	5.1 1				Change	Addition
NAME		treete		IAME				
				i i				
STREET ADDRESS				TREET ADDRESS				
CITY-ST-ZIP		DELETE	5.4 L 6.1 T	HTY-ST-ZIP			Change	Addition
TITLE				IAME				
HAME								
STREET ADDRESS				TREET ADDRESS				
CITY-ST-ZIP	arily that the information constind w	ith this filing does not qualify	for the ex	emotion stated	in Section 119.07(3)(i), Florida Statutes.	L further or	ertify that th	e information
indicated o	on this annual report of symplements	al annual report is true and a	ccurate ar	d that my signa	alure shall have the same legal effect as equired by Chapter 607, Florida Statutes	if made ur	der oath; th	nat I am an
officer or d Block 12 o	tirector of the corporation of the rector Block 13 if changed to the problem.	eiver or trustee empowered to chment with an address.	o execute	this report as re	equired by Chapter 607, Florida Statutes	and that r	ny name ap	opears in

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