FILED Feb 20, 1999 8:00 am

Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L81685

1. Corporation Name

TITLE

NAME

STREET ADDRESS

FRONSA CORP.

Principal Place of Business Mailing Address			-		i infiliate and (min) that a min) took in wet and		
% ALFRED BLANCO, JR. 16 SEVILLA AVENUE CORAL GABLES FL 33134-6117		% ALFRED BLANCO. JR. 16 SEVILLA AVENUE CORAL GABLES FL 33134-6117		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
					06/19/1990		ļ
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	App	lied For
21		26			65-0208859	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	
22		27	7		3. Certificate of Clarics Desires	Fee Req	uired
City & State		City & State	— ·		6. Election Campaign Financing	\$5.00 k	
23		28			Trust Fund Contribution	Added to	rees
Zip	Country Zip		Country		8. This corporation owes the current year	r Intangible ☐ Yes 【	⊠(No
24	9. Name and Address of Curre		10		Personal Property Tax. 10. Name and Address of New Register		
	5. Name and Address of Curre	iit itegistered Agont	81	Name			
BLANCO, ALFREDO, JR			82		ess (P.O. Box Number is Not Acceptable)		
16 S	EVILLA AVE.		82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
CORAL GABLES FL 33134			83	·			
			84	City		85 Zip C	ode
				1		-L	J
office or n	to the provisions of Sections	e of Florida. Such change was autoations of, Section 607.0505, Florid	nonzed by da Statutes	the corporatio	TRUESTE DE LA COMP		istered
12.	OFFICERS AND DIRECTORS		13.				
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	BLANCO, ALFREDO JR		1.2 NAME	1	· ·	<i>;</i>	
STREET ADDRESS	16 SEVILLA AVE.		1.3 STREE	TADORESS	·		
CITY-ST-ZIP	CORAL GABLES FL		1.4 CITY-S	T-ZIP			T A delite -
TITLE	SD	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	BLANCO, LIANA MARIA		2.2 NAME			•	
STREET ADDRESS	16 SEVILLA AVE.		2.3 STREE		•	<u> </u>	ļ
CITY-ST-ZIP	CORAL GABLES FL	☐ DELETE	2. 4 CITY-S	ST-ZIP		. Change	Addition
TITLE			3.1 TITLE 3.2 NAME		•		
NAME				TADDRESS	and the second second	y az j. — -	- "1
STREET ADDRESS			3.4. CITY-S	1			ļ
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	/		Change	Addition
NAME			4.2 NAME		• •	• :	
STREET ADDRESS			4.3 STREE	TADORESS			
· CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME			e e	
STREET ADDRESS			1	TADDRESS			
CITY-ST-ZIP			5.4 CITY-S 6.1 TITLE	T-ZIP		Chanca	Addition
TITLE		☐ DELETE	0.1 IFILE			Change	□ Modigon

CITY-ST-ZIP 14. I hereby 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 on an attachment with an address, with all other like empowered. (305)666-6553

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP