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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name

M13582

(5)

AMERISWISS CORPORATION

FILED Apr 29 1998 8:00am Secretary of State



4414 SW 74		4414 SW 74TH AVE			
MIAMIFL 33 US		MIAMI FL 33155 US		DO NOT WRITE IN THIS SPA	.CE
2.600	SW BIN AVE. PH.B'	9.600 SW	3 rd AVE PH'B	3. Date Incorporated or Qualified	- -
Miam	H, FL. 38129	mami, F	1.33/24	04/04/1985	
2. Principal Pl	ace of Business	2a, Maiking Address		4. FEI Number	Applied For
	SW 3rd AVe		1 3 rd AKE ME	59-2530605	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.			8.75 Additional
22 84		27 PH B'		5. Certificate of Status Desired	Fee Required
City & State		City & State	. 4	6. Election Campaign Financing	\$5.00 May Be
23 M/A1	mi, Florida	28 Miami, P	-lorida	Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Country	8. This corporation owes or has paid the current	
24 33/2	9 25 Dade	29 33129	30 Dade	Personal Property Tax due June 30.	
	9. Name and Address of Current			10. Name and Address of New Registered Age	nt
G	ONZALEZ, DON P.A.		81 Name		
	050 PINES BLVD		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
	JITE 450		62 Street Add	aress (P.O. Box Number is Not Acceptable)	
	EMBROKE PINES FL 33024		83		
	INDITORE I ITEO I E GODET			· · · · · · · · · · · · · · · · · · ·	1
İ			84 City	FL ^B	5 Zip Code
11. Pursuant t	a the provisions of Sections 607 0502	and 607 1508. Florida Stati	ites, the above-named cor	poration submits this statement for the purpose of cha	anging its registered
office or re	egi ste red agent, or both, in the State o	# Florida. Such change was	authorized by the corpora	ation's board of directors. I hereby accept the appoint	ment as registered
agent. Far	n fam iliar with, and accept the obligat	ions at. Section 607.0505. F			
			ionda otatoles:		
SIGNATURE	·			(red when reinstatum)	
	Signature, typed or posited name of registered agent	and trie if applicable (NC	>11 Registered Agent signature requ		RECTORS IN 12
12.	·	and trie if applicable (NC	211 Registered Agent signeture requ	ADDITIONS/CHANGES TO OFFICERS AND DI	RECTORS IN 12 Change Addition
12.	Signature, Typied or printed manie of registerest agent OFFICERS AND	and trie if applicable (NC DIRECTORS	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DI	Change Addition
12. TITLE NAME	Signature, Typied of printed name of registerest agent OFFICERS AND D CHIQUIMBALQUI, VICTOR	and trie if applicable (NC DIRECTORS	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DI	Change Addition
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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 at 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.