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 # 1. Corporation Name

(4)

Sec	reta	ry (10°	Stat	te

FILED

Jan 26 1998 8:00am

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	•	ce of Busines	SS		illing Address								
1177 NW 81 STREET				1177 NW 81 STREET									
Miami FL 33150 US				MIAMI FL 33150 US			DO NOT WRITE IN THIS SPACE						
"				·	•				3.	Date Incorporated or Qualified		-,	_ ,
										09/13/1985			
2. F	rincipal F	lace of Busi	ness	28.	Mailing Address		_		4.	FEI Number		A	pplied For
21	21			26	26					59-2598819		N	ot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5.	Certificate of Status Desired		+	Additional	
	22			27	<u> </u>							Fee R	equired
	City & State			<u> </u>	City & State			6.	Election Campaign Financing		•	May Be	
23	Zip Country			28	28					Trust Fund Contribution			to Fees
_	.ip		Country	<u> </u>	Zip	Coun	try		8.	This corporation owes or has p		_ ^ -	
24		6 Name	25 and Address of Curre	29	ared Acent	30			10	Personal Property Tax due Jun Name and Address of New R			No
				ant neglat	elen Walle		31	Name	10.	Idellie and vodiess of Idea u	egisteret	Ayent	
		RRANO, E											
			NS AVE APT #204			8	32	Street Addr	ess (F	P.O. Box Number is Not Accepta	ıble)		
	DA	L HBR FL	33134				33		-				
						ε	14	City			FI	85 Zip	Code
11.	Pursuant	to the provis	ions of Sections 607 05	02 and 60	7.1508. Florida Stat	tutes, the abo	_L ove-	named corp	oratio	n submits this statement for the			ts registered
	office or a	registered ag	ent, or both, in the Stat	te of Florid	a Such change wa	s authorized	by t	the corporati	on's t	n submits this statement for the poard of directors. I hereby acce	ept the ap	pointment as	registered
		arri Hebriningat vvi	ith, and accept the obii	ganons or	Section 607.0505,	riorida Statu	(68.						
SIG	NATURE	Signature, typed	for printed name of registered a	gent and title i	tappicable (N	IOIf: Registered	Agent	it signature requiri	ed wher	reinstating)	DATE		
12.			OFFICERS AI	ND DIREC	TORS	13.				ADDITIONS/CHANGES TO OFFI	CERS AN	ID DIRECTOR	RS IN 12
TITLE		P			DELETE	1.1 TITL	E					Change	Addition
NAME			eso, olga			1.2 NAV	1E						
STREE	ET ADDRESS 1055 COLLINS AVE #903			1.3 STREET ADDRESS		ADDRESS							
CITY-	ST-ZIP	BAL HARBOR FL				1.4 City	1.4 CHTY - \$T - ZIP						_
TITLE	-	V			☐ DELETE	2.1 TITL	2.1 TITLE					Change	Addition
NAME			vo, esteban			2.2 NAM	1E						ı
STREE	T ADDRESS		COLLINS AVE 204			2.3 STR	ET A	DORESS					
CITY	ST-ZIP	BAL HB	R FL			2. 4 CIT	<u>(-</u> ST	-ZIP					
TITLE		S			☐ DELETE	3.1 TITL	Ε _					Change	Addition
NAME			no, juan			3.2 NAM	E						i
STREE	T ADDRESS	5851 N.	BAYSHORE DRIVE			3 3 STR	ET A	UDDRESS					1
CITY-	ST-ZIP	MIAMI F	il			3 4. CIT	(-ST	- ZIP					
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NAME						4 2 NAN	AE						
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CITY-	ST-ZIP					4.4 CITY	- \$1-	- ZIP					
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CITY-	ST-ZIP					5.4 CITY	-\$1-	· 7IP					
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NAME						6.2 NAM	E						
STREE	T ADDRESS					6.3 STRE	ET A	DDRESS					ĺ

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 of the state 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 attacher of with an address.

SIGNATURE:

CITY-ST-ZIP

14/98