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 #

161

FILED Jan 29 1998 8:00am Secretary of State

1	RKS, INC.	2 (0)		* 1881 6811 118 118 118 118 118 118 118 1	
Principal Plac	e of Business	Mailing Address			A BIBRI DIBIL DIBIL DIBIL DIBIL DIQIL DIQIL ADDI
9791 SW 99 MIAMI FL 33 US		9791 SW 99 STREET MIAMI FL 33176 US		DO NOT WRITE	IN THIS SPACE
		00		3. Date Incorporated or Qualified	
		<u>-</u>		03/14/1986	
	Place of Business	2a. Mailing Address	11	4. FEI Number	Applied For
21 [4] (Suite, Apt.	2 North Kindall Drive	26 11 410 NOTTA Suite, Apt. #, etc.	Kundall brive	59-2660951	Not Applicable
	ik 305	27 Suit 305		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23 MIO	imi, Florida	28 Miami, L	lorida	Trust Fund Contribution	Added to Fees
- Zing 2/1	Country	Zip	Country	8. This corporation owes or has paid	
zip 24 3311	9. Name and Address of Current	29 33176	30 Dade	Personal Property Tax due June 3 10. Name and Address of New Reg	
	<u> </u>	nagistarad Agent	81 Name	10. Name and Address of New Reg	Jistered Agent
DOL CONFORME SERVICES INC.					
SUITE 3000			82 Street Addr	ress (P.O. Box Number is Not Acceptable	e)
1 .	AMI FL 33131		83		
			84 City		85 Zip Code
			1 1		FL '
11. Pursuant office or r	to the provisions of Sections 607,0502 egistered agent, or both, in the State of	and 607.1508, Florida Statu f Florida, Such change was	ites, the above-named corp	poration submits this statement for the pution's board of directors. I bereby accept	rpose of changing its registered
agent. I a	m familiar with, and accept the obligati	ons of, Section 607.0505, F	lorida Statutes.	ion's board of directors. I hereby accept	the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent	CONTRACTOR OF THE PARTY OF THE	TE B		
12.	OFFICERS AND		1E: Registered Agent signature require	ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECTORS IN 12
TITLE	DPST	☐ DELETE	1.1 TITLE		Change Addition
NAME	ASPILLAGA, MARGARITA		1.2 NAMÉ		
STREET ADDRESS	9791 S.W. 99TH ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33176		1.4 CITY-ST-ZIP		
TITLE	1	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	ASPILLAGA, CARLOS G		2.2 NAME		
STREET ADDRESS	9791 S.W. 99TH STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		Change Divining
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		- I be be	4.4 City-St-Zip		·····
TITLE		☐ DELÉTE	5.1 TATLE		☐ Change ☐ Addition
NAME OTDSST 4 DDDSSS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME		and occupie	6.2 NAME		C oversão C vontina
STREET ADDRESS			63 STREET ADDRESS		i
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	ertify that the information supplied with	this filing does not qualify f		Section 119.07(3)(i). Florida Statutes, Lfu	orther certify that the information

Thereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the informatio 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 economic 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 chapted, or on an attachment with an address.

DECKY LANGER A TO

1/22/20 (305)274-1919