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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
Division of Corporations

DOCUMENT # M32143

(3)

FILED Feb 24 1998 8:00am Secretary of State

Press, Inc.					110000110011000110001100011000110001100011000110000			
Principal Place of Business Mailing Address					T COMPANY TO A RESIDENCE STATE OF MANY AND THE RESIDENCE OF THE PROPERTY OF TH	IIWIL WIG	in Anth	81911 1991
7315 NW 43RD STREET MIAMI FL 33166 US		7315 NW 43RD STREET MIAMI FL 33166 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified OF 145 (1000)				
co of Business	2a. Mailing Address						TAN	olied For
						}-		Applicable
otc.	Suite, ApI. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		75 A	dditional
State City & State 28				Election Campaign Financing Trust Fund Contribution				
Country 25	Z(p 29]	Cour 30	niry 		Personal Property Tax due June 30.] Yes		ngible No
	eni Hegistered Agent		04 T	NI	10. Name and Address of New Hegistered A	gent		
	502 and 607, 1508, Florida Stati te of Florida, Such change was scalars of Section 607,0106.	1	84	City e-named corp the corporati	poration submits this statement for the purpose of cion's board of directors. I hereby accept the apport		•	
			13.			DIRE	CTORS	3 IN 12
DP			1 1 TITLE		· · · · · · · · · · · · · · · · · · ·	_		Addition
RODRIGUEZ, OMAR		1.2 NA	ME					
3350 SW 128 AVE	1.3		1.3 STREET ADDRESS					
MIAMI FL		1.4 CIT	1.4 CITY-ST-ZIP					
	DELETE 21		2 1 TITLE			Chi	ange	Addition
		22 NAM	ME	1				
		2 3 STA	EET :	ADDRESS				
	T recent			T-ZIP	711			Addition
	CT DETENT					J Chi	an g e	Addition
		1						
								i
						Cha	ange	Addition
	Country 25 9. Name and Address of Curre RIGUEZ, OMAR NW 43 STREET II FL 33166 the provisions of Sections 607.00 jistered agent, or both, in the State familiar with, and accept the oble politic typed in providing of female and repotentia OFFICERS ALDP RODRIGUEZ, OMAR 3350 SW 128 AVE	STREET T315 NW 43RD STREET MIAMI FL 33166 US Ce of Business Country Zeb City & State Zeb Country Zeb P. Name and Address of Current Registered Agent RIGUEZ, OMAR NW 43 STREET If FL 33166 The provisions of Sections 607.0502 and 607.1508, Florida State pistored agent, or both, in the State of Florida, Such change was familiar with, and accept the obligations of, Section 607.0505, Florida State of Florida, Such change was familiar with, and accept the obligations of, Section 607.0505, Florida State of Florida, Such change was familiar with, and accept the obligations of, Section 607.0505, Florida State of Florida, Such change was familiar with, and accept the obligations of, Section 607.0505, Florida State of Florida, Such change was familiar with, and accept the obligations of, Section 607.0505, Florida State of Florida, Such change was familiar with, and accept the obligations of, Section 607.0505, Florida State of Florida, Such change was familiar with, and accept the obligations of, Section 607.0505, Florida State of Florida, Such change was familiar with, and accept the obligations of, Section 607.0505, Florida State of Florida, Such change was familiar with and accept the obligations of, Section 607.0505, Florida State of Florida, Such change was familiar with and accept the obligations of, Section 607.0505, Florida State of Florida, Such change was familiar with and accept the obligations of, Section 607.0505, Florida State of Florida, Such change was familiar with an accept the obligation of Section 607.0505, Florida State of Florida, Such change was familiar with an accept the obligation of Section 607.0508, Florida State of Florida, Such change was familiar with an accept the obligation of Section 607.0508, Florida State of Florida, Such change was familiar with an accept the obligation of Section 607.0508, Florida State of Flori	STREET 7315 NW 43RD STREET MIAMI FL 33166 US 28. Mailing Address 26 Otc. Clty & State 28 Country 25 P. Name and Address of Current Registered Agent RIGUEZ, OMAR NW 43 STREET II FL 33166 The provisions of Sections 607 0502 and 607 1508. Florida Statutes, the abjistered agent, or both, in the State of Florida, Such change was authorized femiliar with, and accept the obligations of, Section 607 0505, Florida Statutes, of Florida Statutes, the abjistered agent, or both, in the State of Florida. Such change was authorized femiliar with, and accept the obligations of, Section 607 0505, Florida Statutes, the abjistered agent, or both, in the State of Florida. Such change was authorized femiliar with, and accept the obligations of, Section 607 0505, Florida Statutes, the abjistered agent, or both, in the State of Florida. Such change was authorized femiliar with, and accept the obligations of, Section 607 0505, Florida Statutes, the abjistered agent, or both, in the State of Florida. 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Mailing Address etc. Country 27. City & State 28. Country 28. Jap. 29. 30. 9. Name and Address of Current Registered Agent RIGUEZ, OMAR NW 43 STREET If FL 33166 81. Reguez, OMAR NW 43 STREET If FL 33166 83. Reguez, OMAR NW 43 STREET If FL 33166 84. 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Mailing Address otc. 28. Mailing Address 26. Suite, Apt #, etc. 27. City & State 28. Country 29. 30. P. Name and Address of Current Registered Agent RIGUEZ, OMAR NW 43 STREET If FL 33166 83 84 City The provisions of Sections 607 0502 and 607. 1508. Florida Statutes, the above-named correlational agent, or both, in the State of Florida, Suich change was authorized by the corporal familiar with, and accept the obligations of Section 607 0505, Florida Statutes. DOFFICE RIS AND DIRECTORS DP RODRIGUEZ, OMAR 3350 SW 128 AVE MIAMI FL DELETE 2 NAME 2 STREET ADDRESS 1.4 CITY-ST-ZIP DELETE 3 TITLE 2 NAME 3.3 STREET ADDRESS 2.4 CITY-ST-ZIP DELETE 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP DELETE 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	All Provisions of Sections 607 00:02 and 607 1508. Florida Sistutes, the above-named corporation submits this statement of the purpose of Sections 67 00:02 and 607 1508. Florida Sistutus, the above-named corporation submits this statement of the purpose of Sections 67 00:02 and 607 1508. Florida Sistutus, the above-named corporation submits this statement of the purpose of Sections 67 00:02 and 607 1508. Florida Sistutus the above-named corporation submits this statement of the purpose of Sections 67 00:02 and 607 1508. Florida Sistutus the above-named corporation submits this statement for the purpose of status of florids. Sich change was authorized by the corporation's board of directors. Thereby accept the epic femiliar to provisions of Sections 67 00:02 and 607 1508. Florida Sistutus the above-named corporation's board of directors. Thereby accept the epic femiliar to provisions of Sections 67 00:02 and 607 1508. Florida Sistutus the above-named corporation's board of directors. Thereby accept the epic femiliar to provisions provisions of Sections 67 00:02 and 607 1508. Florida Sistutus the above-named corporation's board of directors. Thereby accept the epic femiliar to provisions provisions for the change was authorized by the corporation's board of directors. Thereby accept the epic femiliar to provisions for the change was authorized by the corporation's board of directors. Thereby accept the epic femiliar to provisions for the change was authorized by the corporation's board of directors. Thereby accept the epic femiliar to provisions for the provisions f	Address STREET 17315 NW 4980 STREET MIAMI FL 33166	Address STREET 17315 NM GRD STREET MIAMI FL 33168 DO NOT WRITE IN THIS SPACE

6.4 CITY-ST-ZIP | 6.4 CITY-ST-ZIP | 1.4 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 suppliemental minural 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 employed 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.

4. 2 NAME 4.3 STREET ADDRESS

5 1 TITLE 5 2 NAME

61 TITLE

DELETE

DELETE

44 CITY-S1-ZIP

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE: OMBY Rodliques

STREET ADDRESS CITY+ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

NAME

Em Poderges

10/98 (305)686-697

Change

Change

Addition

Addition