FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

1. corporan	JMENT # M3629 EN STREAK INCORPORATED	(0)			
C/O LEN C	IL ROOST DR	Mailing Address C/O LEN GARCIA 11222 OUAIL ROOS' MIAMI FL 33157 US	T DRIVE	Date Incorporated or Qualified 3a. Date of Last Report	
		US		08/05/1986	06/07/1995
	Place of Business	2a. Mailing Address		4. FFI Number	Applied For
Suite, Apt	# otc	26		59-2709280	Not Applicable
22	. 4, 60.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Sta	te	City & State		6 110000	Fee Required
23		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Ζip	Country	Zip	Country	8. This corporation has liability for it	Added to Fees
24	25	29	30	Florida Statutes Yes	No ☐ No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New R	egistered Agent
CARCIA	LIFONADDO		81 Name		
	A, Leonardo Quail roost dr		82 Street Add	dress (P.O. Box Number is Not Acceptable	le)
	FL 33157		83		
IIINAMII I	12 33 137		53		
			84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502 a	nd 607.1508, Florida Statu	ites, the above named coroo	ration submits this statement for the number	FL 63 Zip Code
familiar w				oration submits this statement for the purp and of directors. Thereby accept the appo	intment as registered agent. Lam
12.	Signature, typied or pents a name of registered above an OFFICERS AND	ofcertagelistic (N	Ole Registered Agent sagranum region		DATE
Trile	DS	DELETE	13.	ADDITIONS/CHANGES TO OFFIC	
NAME	GARCIA, LEONARDO		1.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	11222 QUAIL ROOST DRIVE		1.3 STREET ADDRESS		
CITY - ST-ZIP	MIAM) FL		14 CITY - ST - 7/2		
TITLE	DV	☐ DELETE	2 1 HitF		☐ Change ☐ Addition
NAME	LEVY, GUSTAVO		2.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	11222 QUAIL ROOST DRIVE		2 3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL		2.4 ČITY - ST - ZIP		1
T'TLE NAME	CASTELO ENDIQUE	DELETE	3 1 TITLE		Change Addition
STREET ADDRESS	CASTELO, ENRIQUE L. 11222 QUAIL ROOST DRIVE		3.2 NAME		_
CHTY - ST - ZIP	MIAMI FL		3.3 STREET ADDRESS		
TITLE	DP DP	DELETE	3 4 CITY - ST - ZIP		
NAME	DENISON, FLOYD GENE		4. 1 T-TLE		☐ Change ☐ Addition
STREET ADDRESS	11222 QUAIL ROOST RD		42 NAME		
CITY - ST - ZIP	MIAMI FL		4.3 STREET ADDRESS		
TITLE		DELETE	5 1 TITLE		Change Divine
NAME			5.2 NAME		☐ Change ☐ Addition
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			54 CITY - ST - Z-P		
THILE		☐ DELETE	6 1 MILE		Change Addition
NAME CINCEL ADDRESS			6.2 NAME		El analigo El Modifioli
STREET ADDRESS			6.3 STREET ADORESS		
CITY-ST-ZiP 14. I do hereby	certify that the information supplied with	this files is as less at 1	64C:T1-ST-7:P		

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes 1 further certify that the information indicated on this annual report or supplientental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changing or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTE NAME OF SIGNING OFFICER OR DIRECTOR

4/26/96 305-252-6957