FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

The second secon



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M36409

(4)

SUPER STEAMER OF FLORIDA, INC.

Mailing Address

FILED Apr 22 1998 8:00am Secretary of State



e. D	421 SW 125 1 MIAMI FL 331 US		421 SW 125 AVE. MIAMI FL 33184 US		DO NOT WRITE IN THIS S	SPACE
一個では 一個のでは 一個のでは 一個のできる					3. Date Incorporated or Qualified 08/06/1986	
3	2. Principal P	lace of Business	2a. Mailing Address	, hhnz	4. FEI Number	Applied For
Æ	21			62223	59-2792698	Not Applicable
1	22 8 28 (Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
	City & State	M. Horida	City & State	iorida	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
e di T	24 Zin 331	157 25 Dade		o Dade		Yes No
4		9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered A	Agent
8): 8-2:		rgas, rene j.		br Name		
4		1 SW 125 AVE.		82 Street	Address (P.O. Box Number is Not Acceptable)	
	MI/	VMI FL 33184		83		
	,			63		}
i i				84 City	FL	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-name office or registered agent, or both, in the State of Florida. Such change was authorized by the coagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					corporation submits this statement for the purpose of poration's board of directors. I hereby accept the appropriate the properties of the purpose of the p	changing its registered pintment as registered
Į Ž	SIGNATURE					
F		Signature, typed or printed harm of registered ages			e required when renstating) DATE	DIDEOTODO INI 40
į	12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
\$: <u>1</u>	NAME	VARGAS, RENE, J	Dreeve	1.2 NAME	Vargas, Rene J.	ya change
ŧ,	STREET ADDRESS	421 SW 125 AVE		1.3 STREET ADDRESS	8280 S.W. 159 St	
7	CITY+ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	8288 S.W. 159 St. Miami, Fl. 33157	
Ŀ	TITLE	VP	DELETE	2,1 TITLE	VD ,	Change Addition
200	NAME	VARGAS, CLARISSA M.		2.2 NAME	Vargas, Clarissa H.	^
4	STREET ADDRESS	421 SW 125 AVE		2.3 STREET ADDRESS	8280 S.W. 159. St.	
A4	CITY-ST-ZIP	MAMI FL		2. 4 CITY-ST-ZIP	Miami Florida 33157	
朝	TITLE		☐ DELETE	3 1 THTLE	7	Change Addition
	NAME			3.2 NAME		
1	STREET ADDRESS			3.3 STREET ADDRESS		İ
*	CITY-ST-ZIP			3.4. CITY-ST-ZIP		
-4. -4	TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
# ·	NAME	e.		4. 2 NAME		
- 10	STREET ADDRESS	₽.		4.3 STREET ADDRESS		Ì
2	CITY-ST-ZIP		Песет	4.4 CITY-ST-ZIP		
45. 22. 22.	TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
3	NAME			5.2 NAME		
4	STREET ADDRESS			5 3 STREET ADDRESS	,	
7	CITY-ST-ZIP TITLE	\-	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
22	NAME	\	C Direct	6.2 NAME		The Assessment
严维		,*\		6.3 STREET ADDRESS		-
传	STREET ADDRESS	N. Communication of the Commun		•		
•	CITY-ST-ZIP			6.4 CITY - ST - ZIP	<u> </u>	

14. I 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 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 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 enough at address.

A.A......

4/14/98

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