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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

COLITH CATE ENTERDRISES INC

FILED	
Apr 30 1998 8:00am	1
Secretary of State	

SOUTH GATE ENTERFRISES, INC.				
Principal Place of Business Mailing Address		# EBOLODI: 411 E1001 IIDII DBIJB IBIIA DIII DEBII DIDII OSAII BIDII DIDII ASAII BIDII DIDII DEBII		
14273 SW 108 ST 14273 SW 108 ST MIAMI FL 33186 MIAMI FL 33186		DO NOT WRITE IN TH	HIS SPACE	
US	US		3. Date Incorporated or Qualified	
			11/04/1986	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0126144	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27		D. Certificate of Glades Section	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution L.J.	Added to Fees
Zip Country	Zip	Country	 This corporation owes or has paid the Personal Property Tax due June 30. 	current year Intangible
24 25 9, Name and Address of Current	[29] Registered Agent	<u> </u>	10. Name and Address of New Register	
	Translation Marit	81 Name	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*
FONSECA, HORACIO 4130 S.W. 115TH AVE.			40.0	
4130 S.W. 115111 AVE. MIAMI FL 33165		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
MIPAMI FL 33103		83		
		24 0		as Zio Codo
		84 City		FL 85 Zip Code
Pursuant to the provisions of Sections 607 0502 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligations.	P and 607.1508, Florida Sta of Florida, Such change wa ilions of, Section 607.0505,	lutes, the above-named cor is authorized by the corpora Florida Statutes.	poration submits this statement for the purpor dion's board of directors. I hereby accept the	se of changing its registered appointment as registered
SIGNATURE Signature typed or profest name of registered ager	of word little of apply able (P	OTE Registered Agent signature requ		
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE PD	☐ DELETE	1.1 THILE		Change Addition
NAME FONSECA, HORACIO		1.2 NAME		
STREET ADDRESS 14273 SW 108 ST		1.3 STREET ADDRESS		
CITY-ST-ZIP MIAMI FL		1 4 CITY-ST-ZIP		Change Addition
TITLE S	☐ DELETE	2.1 TITLE		Change 17 Addition
HAME FONSECA, OSMARA		2.2 NAME		
STREET ADDRESS 14273 SW 108 ST		2.3 STREET ADDRESS		
CHY-ST-ZIP MIAMI FL	DELETE	2 4 CITY - ST - ZIP		Change Addition
NAME MATAMOROS, ANGELA R		3.2 NAME		
NAME MATAMOROS, ANGELA R STREET ADDRESS 14273 S.W. 108 ST		3.3 STREET ADDRESS		
4414441 #4		3.4. CITY-ST-ZIP		
CITY-ST-ZIP MIAMI FL.	DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY - ST - ZIP		4.4 CITY - ST - ZIP		!
THE	☐ DELFTE	51 THLE		Change Addition
NAME		52 NAME		†
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-SI-ZIP		5.4 CITY-\$T-ZIP		
TITLE	☐ DELETE	6 1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS				
amilia Abbricos		6 3 STREET ADDRESS		

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 eath, that I am an officer or director of the corporation of th

4-15-98

305-382-9929