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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M43673

KIKO'S PARTY RENTALS #1, INC.

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90051 048 ***150.00



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Principal Place of Business Mailing Address						(LOUI BOR VILLE DINA DE LE BOULD DONN DE DE LE CONTROL DE		Minn Ribit ton
1965 EAST 4TH AVENUE 1965 EAST 4TH AVENUE								
HIALEAH FL 33010 HIALEAH FL 33010								
						DO NOT WRITE IN THIS SP	ACE	
					ļ	3. Date Incorporated or Qualifed		
	(8)	O Maritima Address of				12/22/1986 4. FEI Number		pplied For
2. Principal Place of Business 2a. Mailing Address						59-2748496	<u> </u>	ot Applicable
26								Additional
22 27						5. Certifcate of Status Desired		equired
City & State City & State						6. Election Campaign Financing	\$5.00	May Be
28						Trust Fund Contribution	Added	to Fees
Zip						8. This corporation owes the current year Intang	-	
24	25	29 30	<u> </u>				Yes	□No
	9. Name and Address of Curren	t Registered Agent	— 	<u>al al</u>		10. Name and Address of New Registered Ag	ent	
HERNANDEZ, MARGARITA H. 573 EAST 61ST STREET HIALEAH FL 33013				81 Name 82 Street Addre				
						ss (P.O. Box Number is Not Acceptable)		
				3				
			ľ	_ [*				
			8	4 Ci	ty	FL	85 Zip	Code
11 Pursuant	to the provisions of Sections 607 050	2 and 607 1508 Florida Statutes.	the abo	ve-nai	med corpor	ation submits this statement for the purpose of cha	anging its	s registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change as authorized by the corporation's board of directors. I hereby accept the appointment as registered								
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: Rr	gistered Ag	jent sign	ature required w	when reinstating) DATE		
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTO	ORS IN 12
TITLE	PTD	☐ DELETE	1.1 TITLE			APR] Change	☐ Addition
NAME	HERNANDEZ, JOSE F.		1.2 NAME	Ξ		芝		ł
STREET ADDRESS	573 E. 61 ST		1.3 STRE	ETADO	RESS	16	, 	} '
CITY-ST-ZIP	HIALEAH FL		1.4 CITY-	ST-ZIP				
TITLE	,,,,		2.1 TITLE		1	25] Change	☐ Addition }
NAME	HERNANDEZ, MARGARITA H.		2.2 NAME	Ē -				İ
STREET ADDRESS	573 E. 61 ST		2.3 STRE	ET ADOI	RESS	02		Ì
CITY-ST-ZIP	HIALEAH FL		2. 4 CITY					
TITLE		☐ DELETE	3.1 TMLE)	E] Change	Addition
NAME:	•		3.2 NAME					į
STREET ADDRESS		-	3.3 STRE	-	i			}
CITY-ST-ZIP			3.4. CITY				Change	Addition
TITLE		☐ DELETE	4.1 TITLE			t.	nange	☐ Addition
NAME			4. 2 NAM					
STREET ADDRESS	!		4.3 STRE		RESS			Ì
CITY-ST-ZIP		☐ DELETE	4.4 CITY-			<u> </u>	Change	Addition
TITLE		רי הברבוב	5.1 TITLE 5.2 NAME			L	7 chanag	
NAME			5.3 STRE		RESS			ł
STREET ADDRESS			5.4 C/TY-					ĺ
CITY-ST-ZIP	!	☐ DELETE	6.1 TITLE		-		Change	☐ Addition
TITLE NAME		[] OLLG16	6.2 NAME					
STREET ADDRESS			6.3 STRE		RESS			
CITY ST 7ID			6.4 CITY-					

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, or on an attachment with an address, with all other like empowered.