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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M46279

(9)

FILED May 01 1998 8:00am Secretary of State

ARINGO ENTERPRISES, INC.				
				BORN BORN BORN BORN BORN BORN 1881
Principal Place of Business	Mailing Address			
3191 CORAL WAY	3191 CORAL WAY			
STE 200 MIAMI FL 33145	STE 200 Miami FL 33145		DO NOT WRITE	IN THIS SPACE
US	US		3. Date Incorporated or Qualified	
			02/09/1987	
2. Principal Place of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number	Applied For
21	26		59-2766706	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 Chy & State	27			Fee Required
	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
23 Country	<b>28</b> Zip	Country	This corporation owes or has pair	
24 25	29	30	Personal Property Tax due June	
Name and Address of Current		100	10. Name and Address of New Reg	
MESA; JULIAN L.		81 Name 0	1910 R. PED	+00
3191 SW 22 STREET		82 Street Addr	ess P.O. Box Number is Not Acceptab	
SUITE 200		3,100, 301	191 COTAT W	AU
MIAMLEL 33145		83	uite 200	•
		84 City	<u> </u>	85 Zin Code
			niami	FL 32143
11. Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of	and 607, 1508, Florida Statu	ites, the above-named corp	oration submits this statement for the p	urpose of changing its registered
agent. I am lamiliar with, and accept the obligat	ions of, Section 607.0505, F	lorida Statules.		
SIGNATURE Supplement			OY	/23/98
Signature, typod or publied name of registered agent		TF: Registered Agont signature requi	ed Miles i Billstainig)	DITTE
12. OF FICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME MESA, JULIAN	La occerc	1.2 NAME	Tour o Rection	
STREET ADDRESS 3104-6W 22-5TREET \$200		1.3 STREET ADDRESS 3	IAI	SUSTIN 2000
CITY-ST-ZIP MIAM FL		1.4 CITY-ST-ZIP	Igio R. Penton Igi MAMI (FI 3344)	
TITLE	DELETE	2.1 TITLE	<u> </u>	Change Addition
NAME	<del>-</del>	2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CITY - ST - ZIP		
TITLE	☐ DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - ST - ZIP		
TITLE	DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CHY-ST-ZIP		4.4 City-St-ZIP		Change Addition
TITLE	☐ DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
TITLE	1 DELETE	Q. I TITLE		En crowings En controls
I MANAGE	<del>_</del>	C 2 NAME		
NAME .	_	6.2 NAME		
NAME STREET ADDRESS CITY-ST-ZIP	_	6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP		

I hereby certify that the information supplied with this thing does not qualify for the exemption stated in Section 119.07(3)(f). Florida statutes. I further earlier that information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under early; 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.