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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M53853**

(1)

MAYARS CORPORATION

(1

FILED Mar 31 1997 8:00am Secretary of State

| Pangapul Plaa 399 NW 72 AVI MIAMI FL 33120 | E #204 | Macing Address 399 NW 72 AVE #204 MIAMI FL 33126-4306 | | | | | |
|--|---|---|-------------------------------|---------------------|--|-----------------------------|-------------------------------|
| | | | | | 3. Date Incorporated or Qualified 06/15/1987 | 3a. Date of La 04/15/199 | , |
| 2. Percipal C 21 | piper of Basine se | 2a. Mailing Address | | | 4. FEI Number 59-2822633 | - | Applied For |
| Suite Apt | # - 61. | Suite, Apt. #, etc. | | | | \$8.7 | Not Applicable 75 Additional |
| 22 | | 27] | | | 5. Certificate of Status Desired | 1 1 7 7 7 7 7 7 | e Required |
| City & State | e e e e e e e e e e e e e e e e e e e | City & State | | | 6. Election Campaign Financing | | 00 May Be |
| [23] Zip | Country | 28] //ip | Count | | Trust Fund Contribution | | ded to Fees |
| 24 | 25 | 29 | 30 | , | 8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes \(\sum_{\text{X}} \text{Yes} \sum_{\text{No}} \text{No} \) | | |
| | 9. Name and Address of Currer | nt Registered Agent | | | 10. Name and Address of New Re | gistered Agent | |
| | CHEZ, LIDIA | | 8 | 1 Name | | | |
| 399 NW 72ND AVE STE 204 | | | 8: | 2 Street Add | ress (P.O. Box Number is Not Acceptab | le) | BARRA S. H MARA ANDA A |
| 1 | 204 Al FL 33126 | | 8: | 3 | | | |
| 1770 W | W (C 00 120 | | - | | | | |
| | | | 8 | 1 City | | FL 85 3 | Zip Code |
| office or r | egistered agent, or both in the State or trenitor with, and account the oblig | rolf florida. Such change was at ons of, Section 607.0505, F | authorized k orida Statute | by the corporates. | poration submits this statement for the p ation's board of directors. I hereby accep ared when reinstating) | the appointmen | t as registered |
| 12. | . = | D DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFIC | | |
| 10; i | d Sanchez, Juan Arsenio | [7] DEFELF | 11 TILE | | | L Char | nge Addit-on |
| 5 Rel (40° - e) | 399 N.W. 72 AVE. #204 | | 1.2 NAME | FT ADDRESS | | | |
| CGN - \$1 - 2011 | MIAMI FL | | 1.3 STREE | | | | |
| 111; | | DELETE | 2 : 10fle | | | Char | ige Addition |
| NW. | | | 2.2 NAME | | | | |
| STREET ACCUESTS | | | | ET ADDRESS | | | |
| THE ST 26 | | DELFTE | 2. 4 CITY 3.1 TITLE | | | Chan | nge Addition |
| 1.16% | | | 3.2 NAME | ŀ | | | ge La raone |
| S HOLLADOL P | | | 3.3 STHES | T ADDRESS | | | |
| OLY 51 76 | | | 3.4 CITY | -S1-2IP | | | |
| 111.± | | ☐ DELETE | 4.1 THE | | | Chan | nge Addition |
| STREET ADDRESS | | | 4. 2 NAM | i | | | |
| OPY SI Zer | | | 4.4 CITY | ELADDRESS SL-716 | | | |
| 101 6 | | DELETE | 5.1 TITLE | | | Chan | nge Addition |
| NAM1 | | | 5.2 NAME | | | | |
| 5:014.174.906.5 | | | 5 3 STREE | T ADDRESS | | | |
| CLA SLAD | | Document | 5.4 CHTY - | | | | |
| 10.0 NAM | | [_] DELETE | 6.1 THE | | | Chan | ige 🔲 Addition |
| STREET A DRIVE | | | 6.2 NAME | 1 ADDRESS | | | |
| anction wine | | | u.5 51ffct | . ההמחכעות ד | | | |

14. Les hereby centry that the information supplied with this fiting does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this actual 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 Lavi an office for director of the corporation or if effect verticated 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.