| CORPC ANNUAL | Rofit Oration L report 997 | | | Sandra B. Secretary | | | Apr 3 Sec | | | | 00ai State |
|---|--|--|--|---|--|---------------|--|--------------|-----------------------------|---------------------------|---|
| OCUME Corporation Na 3245-55 CC | arne | M61725 | (| (1) | | | | | | | |
| ncipal Place of D RAFAEL V. PA 3 WEST 16TH A LEAH FL 33012- | ADILLA AVE. | | Mailing Addre C/O RAFAEL V 6383 WEST 16 HIALEAH FL 33 | /. Padilla Th ave. | | 3. | Date Incorporated or 0 | | | e of Last R | |
| Principal Place | e of Business | | 2a. Mailing Ag | idress | | | 10/26/1987 FEI Number | | | 1/1996 | • |
| | | | 26 | | | | 65-0026322 | | | | plied For I Applicable |
| Suite, Apt.#, el | etc | | Su⊧te, Apt. | #, etc. | | 5. | Certificate of Status De | sired | | \$8.75 / Fee Re | |
| City & State | | | City & Stat | te | ····· · · · · · · · · · · · · · · · · | 6. | Election Campaign Fin | - | | \$5.00 | |
| Zip | | Country | 28 Zip | | Country | 8. | Trust Fund Contribution This corporation has li | | ntangible ta | Added tax under s | |
| | 25 9. Name and | Address of Current I | 29 Registered Agen | | 30 | | Florida Statutes Name and Address of | Ľ. | Yes 🔲 | No | |
| | A, RAFAEL V | | negistered Agen | n | 81 Name | 10. | Haine and Address C | i new net | ISTOLOG M | geni | |
| | H FL 33012 | | | | 83 | | | | | | |
| Pursuant to th office or regis agent. Lam fa NATURE | he provisions c stered agent, c amiliar with, an | | | | 84 City s, the above-named uthorized by the corp rida Statutes. | | n submits this statemer loard of directors. I her | t for the pe | | | Code s registered registered |
| Pursuant to th office or regis agent. Lam fa NATURE | he provisions c stered agent, c amiliar with, an | of Sections 607.0502 is both, in the State of diaccept the obligation of organized agent and of organized agent ag | and the if applicable | | 84 City | required when | | | Urpose of c t the appoi | changing It intment as | s registered registered |
| Pursuant to the office or regis agent. Lam ta NATURE | he provisions c stered agent, c amiliar with, an ana. ⊴ace orana | ed name of registered agent a | ano trie il applicable DIRECTORS | | 84 City s, the above-named uthorized by the corp rida Statutes. Registered Agent signature 13. 1.1 IffLE | required when | reinstating) | | DATE DATE | changing It intment as | s registered registered |
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