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

## Apr 21 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # M66056 (6)TIME ENTERPRISES, INC. Principal Place of Business Mailing Address 2500 S.W. 107TH AVE., STE #52 2500 S.W. 107TH AVE., STE #52 MIAMI FL 33165 MIAMI FL 33165 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/26/1988 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable 59-2081173 Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional $\Box$ 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zıp Country Zip Country This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. ☐ Yes ☐ No 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ESQUENAZI, JULIO 2500 S.W. 107TH AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 STE 5 **B**3 **MIAMI FL 33165** 84 City Zip Code 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 agont, or both, in the State of Florida. Such change was 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 Stycellure, typed or pented name of registered agent and title 4 applicable (NOTF: Registered Agent signature required when reinstalling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE ☐ Change ☐ Addition **GUTIERREZ. ALFREDO** NAME 1.2 NAME **CR2E034** 2500 S.W. 107TH AVE 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE GUTIERREZ, LUIS E. NAME 2.2 NAME 2500 S.W. 107TH AVE 2.3 STREET ADDRESS STREET ADDRESS MIAM) FL CITY - ST - ZIP 2.4 CITY - ST - ZIP DELETE Change Addition TITLE SVD 3.1 TITUE HERRERA, CARLOS NAME 3 2 NAME 2500 S.W. 107TH AVE. 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 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 eath; 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 13 if changes of on an address. SIGNATURE: A

**FILED** 

Daytime Phone #

0264458