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 # M68349

(3)

BIGHAM'S INT'L, CORP.							81 4 31 81811 Brorr We	ik stali Pipir ta	
									All .
Principal Plac	ce of Business	Mailing Address				TO THE REPORT OF THE PROPERTY		ill Cicil Bibil 10	ill
10852 S.W. 88TH STREET 10852 S.W. 88TH STREET									
APT. 2-121 APT. 2-121									
MIAMI FL 33	3176	MIAMI FL 33176				DO NOT WRITE IN	N THIS SPACE		
}						3. Date Incorporated or Qualified			
2. Principal F	Place of Business	2a. Mailing Address				02/03/1988 4. FEI Number		Applied F	
21 26						65-0031377	\vdash	Applied Fo	
Suite, Apt. #, etc. Suite, Apt. #, etc.								75 Addition	
22						5. Certificate of Status Desired		e Required	aı
City & State City & State						6. Election Campaign Financing	\$5	.00 May Be	
23		28						ded to Fees	
Zip	Country	Zip	Counti	У		8. This corporation owes or has paid	the current yea	ar Intangible	
24	25		30			Personal Property Tax due June 30		☐ No	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Regis	stered Agent		
1	ARTINEZ, BLANCA DE		8.	l Name					
10852 S.W. 88TH STREET				Street	Addres	ss (P.O. Box Number is Not Acceptable	;)		
1	PARTMENT 2-121								
∤ MI	IAMI FL 33176		83	5					
			84	City			 85	Zip Code	$\overline{}$
11 D	A. H			l			FL °		
office or r	registered agent, or both, in the State of	and 607.1508, Florida Statute of Florida. Such change was a	is, the abou uthorized t	re-named ry the cor	orpor poration	ration submits this statement for the pur n's board of directors. I hereby accept t	pose of changi the appointmer	ng its registe it as register	ered red
agent. I a	im familiar with, and accept the obligation	dons of, Section 607.0505, Floa	rida Statute	s.	•	,		•	
SIGNATURE	Signature, typed or printed name of registered agen	and title if and the tracking the CHOTE	. Constitution of the			when reinstating)	DATE		
12.	OFFICERS AND		13.	laur altuarou	a required	ADDITIONS/CHANGES TO OFFICE		TORS IN 12	
TITLE	DP	DELETE	1.1 TITLE		Т	1.00.110.110.110.110.110.110.11	Char		dition
NAME	MARTINEZ, BLANCA DE		1.2 NAME				_	• –	į
STREET ADDRESS	10852 SW 88TH ST AP 2-121		1	T ADDRESS					
CITY-ST-ZIP	MIAMI FL		1.4 CITY-						
TITLE	DST	☐ DELETE	21 TITLE	<u> </u>			Char	nge 🔲 Add	dition
NAME	MARTINEZ, HECTOR		2.2 NAME					•	
STREET ADDRESS	10852 SW 88TH ST AP 2-121		2.3 STREE	T ADDRESS					
CITY-ST-ZIP	MIAMI FL		2, 4 CITY-	ST-ZiP					
TITLE		DELETE	3.1 TITLE	·			Char	nge 🔲 Add	dition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	T ADDRESS					
CITY - ST - ZIP			3.4. CITY-	ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE				☐ Char	nge 🔲 Add	dition
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREE	T ADDRESS					İ
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				-	
TITLE		☐ DELETE	5.1 TITLE				Chan	ige 🗌 Add	dition
NAME			5.2 NAME]				1
STREET ADDRESS			5.3 STREE	r address					-
CITY-ST-ZIP			5.4 CITY-	ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE	_			☐ Chan	nge 🔲 Add	dition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREE	ADDRESS					ļ
CITY-ST-ZIP			6.4 CITY-	ST-ZIP					- 1

14. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

Blave at most in 19ED

01-16-98

(305)595-2461

FILED

Jan 28 1998 8:00am

Secretary of State

:R2E034 (10/97)