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PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT # M70810



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90097 038 ***150.00

1. Corporation Name WIDE TRACK INC.								
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Principal Place of Business Mailing Address							- I (12001)) iti (1201 1200) isiti ildii 400 400) eisit eisit eisii 4100 eisi 4200 eisi 4	,1
835 W. 71 ST. 835 W. 71 ST.								
HIALEAH FL 33014 HIALEAH FL 33014							DO NOT WRITE IN THIS SPACE	
							3. Date Incorporated or Qualifed	\neg
							03/07/1988	
2. Principal Place of Business 2a. Mailing Address			. Mailing Address				4. FEI Number Applied For	\neg
21		26					65-0037131 Not Applicate	le ·
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional	ļ
22			27				Fee Required	\dashv
City & State			City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip Country			Zip Counti			····	8. This corporation owes the current year Intangible	\dashv
24	25 29 30		_	Country		Personal Property Tax.		
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent	\Box	
					81	Name		
FERRANDO, JUAN FELIPE				82 Street Address (P.O. Box Number is Not Acceptable)			\dashv	
835 W. 71 ST.				52 Street Address (F.O. Box Number is Not Acceptable)			_	
HIALEAH FL 33014				83				
					84	City	85 Zip Code	\neg
					he above-named corporation submits this statement for the purpose of changing its registere			
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of m familiar with, and accept the obligat	of Floric	da. Such change was au'	thorized	by i	the corporation	n's board of directors. I hereby accept the appointment as registered	
SIGNATURE							·	-
				Registered	Agen	t signature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	-1
12.	P OFFICERS ANI	DURE	□ DELETE	1.1 711	LE		Change Addi	ion
NAME	FERRANDO, JUAN FELIPE			1.2 NA			_ , _	
STREET ADDRESS	COOC 147 40 43/E			1.3 STREET ADDRESS		ADDRESS		
CITY-ST-ZIP	HIALEAH FL			1.4 CITY-ST-ZIP				
TITLE	VTS DELETE				2.1 TITLE		☐ Change ☐ Addi	ion
NAME	FERRANDO, LUIS FELIPE			2.2 NA	2.2 NAME			
STREET ADDRESS 835 W71ST-STREET				2.3 ST	2.3 STREET ADDRESS		المراجع المراجع المراجع المراجع المراجع المنطق المحاج المراجع المنطق المحاج المراجع	
CITY-ST-ZIP	HIALEAH FL			2.4 C	2. 4 CITY-ST-ZIP			
TITLE	DELETE			3.1 TITLE		☐ Change ☐ Addi	IOU	
NAME	•		4	3.2 NAME			- }	
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP	<u> </u>		DELETE	3.4. CI		T-ZIP	☐ Change ☐ Addi	tion
TITLE			☐ DELETE	4.1 TTI 4. 2 N			☐ Change ☐ Addi	
NAME				1		ADDRESS	•	
STREET ADDRESS						1		- 1
CITY-ST-ZIP TITLE				■ 7.7 UI	4.4 CITY-ST-ZIP 5.1 TITLE			- 1
			DELETE	5.1 TI	LΕ		☐ Change ☐ Addi	ion
		•	☐ DELETE	5.1 TIT 5.2 NA			☐ Change ☐ Addi	tion
NAME STREET ADDRESS			☐ DELETE	5.2 NA	ME	ADDRESS	☐ Change ☐ Addi	tion
NAME			☐ DELETE	5.2 NA	ME REET		☐ Change ☐ Addi	iion
NAME STREET ADDRESS CITY-ST-ZIP	Support to the		☐ DELETE	5.2 NA 5.3 ST	ME REET IY-SI		Change Addi	
NAME STREET ADDRESS CITY-ST-ZIP	例 新新 () () () () () () () () ()			5.2 NA 5.3 ST 5.4 CI 6.1 TII 6.2 NA	ME REET IY-SI ILE ME	r-ZIP		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	を表すであった。 1112-91 - 第一次のような名			5.2 NA 5.3 ST 5.4 CI 6.1 TII 6.2 NA	ME REET IY-SI ILE ME			

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTEDNAME OF SIGNING OFFICER OF DIRECTOR

Daytime Phone #