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 #

Suite, Apt. #, etc

ROSADO, CARLOS A. 7350 NW 7TH ST.

SUITE 105 MIAMI FL 33126

Clty & State

21

22

23

24

Zip

M71840

(6)

ROSADO ADMINISTRATION GROUP, INC.

Principal Place of Business	Mailing Address
7350 NW 7TH ST. Suite 105 Miami Fl 33126	7350 NW 7TH ST. Suite 105 Miami Fl 33126
2. Principal Place of Business	2a. Mailing Address

9, Name and Address of Current Registered Agent

03/07/1988 4. FEI Number 65-0049424

Suite, Apt. #, etc. Certificate of Status Desired City & State 6. Election Campaign Financing

Trust Fund Contribution Country Zib Country 8. This corporation owes or has paid the Personal Property Tax due June 30. 25 29 30

81

82

FILED May 15 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

	Applied For
	Not Applicable
	3.75 Additional Fee Required
	5.00 May Be
	Added to Fees
current y	ear Intangible
☐ Ye	s No
ed Agen	1

10. Name and Address of New Register Street Address (P.O. Box Number is Not Acceptable) Zip Code

3. Date Incorporated or Qualified

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 agent, 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 5	lonature, typedky pointed name of registered ngent and fil	le if applicable (NOTI	: Registered Agent signature regu	sired when reinstating) DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECT	ORS IN 12
TITLE	PD	DELETE	1.1 TITLE	☐ Chang	e Addition
NAME	ROSADO, CARLOS		1.2 NAME		
STREET ADDRESS	10740 SW 135TH TERR.		13 STHEET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	ST	DELETE	2 1 TITLE	Chang	e 🔲 Addition
NAME	ROSADO, GABRIELA		2.2 NAME		
STREET ADDRESS	10740 SW 135TH TERR.		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE	Chang	e Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-2IP		
TITLE		☐ DELET€	4.1 TITLE	Chang	e 🔲 Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE	☐ Chang	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CHTY- \$1 - ZIP	<u> </u>	
TITLE		DELETE	61 TITLE	☐ Chang	Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
D(TV - ST - 7)P			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 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. W

SIGNATURE