

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Mar 03, 1999 8:00 am**  
**Secretary of State**

03-03-1999 90124 020 \*\*\*150.00

**DOCUMENT # M76609**

1. Corporation Name  
**WINDBREAK (FLA) CORP.**

Principal Place of Business

10462 NW 31ST TR  
MIAMI FL 33172  
US

Mailing Address

10462 NW 31ST TR  
MIAMI FL 33172  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/14/1988

4. FEI Number

65-0044547

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

PALACIOS, RICARDO  
10462 NW 31ST TERR.  
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
DP  
ROSSEL, ALVARO  
STREET ADDRESS  
10462 N.W. 31 TERRACE  
CITY-ST-ZIP  
MIAMI FL 33172

TITLE ☐ DELETE

NAME  
DVP  
MILOSLAVIC, LUCAS  
STREET ADDRESS  
10462 N.W. 31 TERRACE  
CITY-ST-ZIP  
MIAMI FL 33172

TITLE ☐ DELETE

NAME  
DS  
PALACIOS, RICARDO  
STREET ADDRESS  
10462 N.W. 31 TERRACE  
CITY-ST-ZIP  
MIAMI FL 33172

TITLE ☐ DELETE

NAME  
DT  
MILOSLAVIC, LUKO  
STREET ADDRESS  
10462 N.W. 31 TERRACE  
CITY-ST-ZIP  
MIAMI FL 33172

TITLE ☐ DELETE

NAME  
D  
VASQUEZ, ANGELICA  
STREET ADDRESS  
10462 NW 31ST TERR.  
CITY-ST-ZIP  
MIAMI FL 33172

TITLE ☐ DELETE

NAME  
D  
PENA, JULIO  
STREET ADDRESS  
10462 N.W. 31ST TERR.  
CITY-ST-ZIP  
MIAMI FL 33172

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

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 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 affidavit with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)