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 # M927

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(0)

R. F. Y. CORPORATION

FILED Apr 15 1998 8:00am Secretary of State

Principal Plac	ce of Business	Mailing Address			I NEDLEGALIS HIM SOLIED SIDIL BOOM DISTRIBUTION DID	6 83811 61811 61811 \$1841 81814 1881
102 N.E. 22ND STREET		163 W. 24TH STREET				
MIAMI FL 33	137-4825	HIALEAH FL 33010			DO NOT WOLLD IN T	LUB 404.0F
		U\$			DO NOT WRITE IN T 3. Date Incorporated or Qualified	HIS SPACE
2. Principal P	Place of Business	2a, Mailing Address			08/04/1988 4. FEI Number	Applied For
21	The Control of the Co	26			65-0075280	Applied For Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.		I ' '''	\$8.75 Additional
22		27	7		5. Certificate of Status Desired	Fee Required
City & State		Cily & State	Cily & State		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	t		Countr	у	8. This corporation owes or has paid the	current year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
<u> </u>	9. Name and Address of Cu	rrent Registered Agent		1	10. Name and Address of New Registe	red Agent
	SE REIMONDEZ		81	Name		
	3 W. 24TH STREET		82	Street Add	ress (P.O. Box Number is Not Acceptable)	
H1/	ALEAH FL 33010	•	83			
			63			
			84	City		85 Zip Code
11 Purcuant	to the provisions of Sections 607	0502 and 607 1509 Florida Stat	udon the abou	o named sor		S of changing the registered
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.						
agentia	im familiar with, and accept the of	oligations of, Section 607.0505, F	Florida Statute	18.		
SIGNATURE	Signature, typod or printed name of registeres	1 socut and title discolorable (Nt	Olf Registered Ac	ent signature room	lred when reinstating) DA	76
12.		AND DIRECTORS	T 13.	ciii signoto o rego	ADDITIONS/CHANGES TO OFFICERS	
TITLE	P	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME			1.2 NAME			·
STREET ADDRESS	102 N.E. 22 ST.		1.3 STREE	1 ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP			
TITLE	T	DELETE	2.1 TITLE			Change Addition
NAME	REIMONDEZ , JOSEFINA		2.2 NAME			
STREET ADDRESS	102 NE 22 ST.		2.3 STREE	T ADDRESS		
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-ST-ZIP			
TITLE	DELETE 3		3 1 THILE			☐ Change ☐ Addition
NAME	1		3.2 NAME			
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP		Dolore	3.4. CITY-	ST-ZIP		
†ITLE		☐ DELET e	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			•	T ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY - :	S1-ZIP		Change Addition
NAME			5.1 TITLE			
			5.2 NAME	r ADDOCEC		
STREET ADDRESS CITY-ST-ZIP				T ADDRESS		
TITLE		DELETE	5.4 CITY - 5	01 - ZIP		Change Addition
NAME		the second	6.2 NAME			المستون ال
STREET ADDRESS				ADDRESS		
CITY_CT_7IB			0.5 STREET	T 30		

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 address.