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

DOCUMENT # M94712

1. Corporation Name

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90107 009 ***150.00

NEARCO, INC.					ATRAK BIBIT ATRAK BIBIT ATRAK 1981	
Principal Place of Business Mailing Address						TATE BERTE GEGET ATRES GEGES FRAN
8341 N.W. 66TH STREET 8341 N.W. 66TH STREET						
MIAMI FL 33166 MIAMI FL 33166					DO NOT WRITE IN THIS	SPACE
					3. Date incorporated or Qualifed	
1					08/17/1988	
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21	-	26			65-0078163	Not Applicable
		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
—	3	28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Int	angible
24	25	29 3	0		Personal Property Tax.	☐ Yes 【☑KNo
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent
_4			81	Name		
MARITZABEL, NAVAS			82	Street Ad	dress (P.O. Box Number is Not Acceptable)	-
	NW 66 ST			ļ		
MIAN	M FL 33166		83			
			84	City	FL	85 Zip Code
	60	2 COZ 4500 Florido Ctotutos	the chair	n named sa		changing its 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 ar	n familiar with, and accept the obligat	ions of, Section 607.0505, Florid	da Statutes	•		
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable (NOTE: R	Registered Age	nt signature regu	ired when reinstating) DATE	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12
TITLE	PT ·	☐ DELETE	1.1 TITLE			Change Addition
NAME	NAVAS, MARITZABEL		1.2 NAME		•	
STREET ADDRESS	8341 N.W. 66TH ST.		1.3 STREE	TADDRESS		ł
CITY-ST-ZIP	MIAMI FL		1.4 CITY-S	T- ZIP		
TITLE	VS	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	PINERUA, LUIS		2.2 NAME	ĺ		
STREET ADDRESS	8341 N.W. 66TH ST.		2.3 STREE	TADDRESS		Ì
CITY-ST-ZIP	MIAMI'FL		2:4-CITY-6	ST- ZIP		☐ Change ☐ Addition
TITLE		☐ DELETE	3.1 TITLE			☐ Cliarige ☐ Modificit
NAME			3.2 NAME		• .	
STREET ADDRESS		,		TADDRESS	•	
CITY-ST-ZIP	·	☐ DELETE	3.4. CITY-5	ST-ZIP		☐ Change ☐ Addition
TITLE	•	OCCE,C	4.2 NAME	İ		
NAME				T ADDRESS	,	
STREET ADDRESS			4.4 CITY-S			
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE	-1-a-IF		☐ Change ☐ Addition
NAME		-	5.2 NAME			
STREET ADDRESS			5.3 STREE	TADDRESS		
CITY-ST-ZIP			5.4 CfTY-S	T-Z/P		
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STRE€	TADORESS	•	
CITY- ST- 7IP			6.4 CITY-S	T-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 en an attachment with an address, with all other like empowered.

SIGNATURE: