FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90005 050 ****61.25

1999 DOCUMENT # N15740

1. Corporation Nan SPRINGER	warehouse condom	INIUM ASSOCIATION, INC),. 					
Principal Place of Business 2747 W 78TH ST HIALEAH FL 33144 US		Mailing Address 890 SW 69TH AVE MIAMI FL 33144 US						
		2a. Mailing Address			3. Date Incorporated or Qualifed 07/07/1986			
2. Principal Place	of Business	26			4. FEI Number		Applied	
21		Suite, Apt. #, etc.			59-2755110	_	Not Apr	
Suite, Apt. #, etc.		27 City & State		Certificate of Status Desired		\$8.75 Additi	onal ed	
City & State		├ ─┐				\$5.00 May	Be	
23		Zip	Country	<u> </u>	6. Election Campaign Financing		Added to Fe	es
Zip	Country	—¬ _	0		Trust Fund Contribution 10. Name and Address of New	Registered /		
24	25	(29)			10. Name and Address of No.			į
	9. Name and Address of Curr	ent Kedistorea	81		·			
SPRINGER, HELEN 890 SW 69TH AVE MIAMI FL 33144			82		iress (P.O. Box Number is Not Accep	FL	85 Zip Cod	le
11. Pursuant to office or reagent. I am	o the provisions of Sections 617. gistered agent, or both, in the St n familiar with, and accept the ob	.0502 and 617.1508, Florida Statute tate of Florida. Such change was at oligations of, Section 617.0503, Flor	s, the abouthorized to	ve-named co by the corpora es.	rporation submits this statement for the tion's board of directors. I hereby acc	ept the appo	intment as regist	ered
			Registered A	gent signature requ	uired when reinstating) ADDITIONS/CHANGES TO C	FFICERS A	ND DIRECTORS	S IN 12
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: R OFFICERS AND DIRECTORS			13.	 -			Change	T vioquaci
12.		DELETE	1.1 ΠΤ					•
TITLE	PD SPRINGER, ALLEN		1.2 NA	L.		•		
NAME	890 SW 69TH AVENUE			REET ADDRESS				Additio
STREET ADDRESS				Y-ST-ZIP			☐ Change	Addidd
CITY-ST-ZIP	MIAMI FL	DELETE	2.1 111	LE]				
TITLE	S CARMEN		2.2 NA		•			
NAME	GOMEZ, CARMEN		•	REET ADDRESS				☐ Additio
STREET ADDRESS	2747 W. 78TH STREET			TY-ST-ZIP			Change	Addition
CITY-ST-ZIP	HIALEAH FL 33016	☐ DELETE	3.1 71	rle				
TITLE	D DELEN		3.2 N/				• .	
NAME	SPRINGER, HELEN			TREET ADDRESS				
STREET ADDRESS	890 S.W. 69TH AVENUE			TY-ST-ZIP			Change	Addit
CITY-ST-ZIP	MIAMI FL	☐ DELETE	4.1 T	ITLE			•	
TITLE	D			NAME	1			٠.
NAME.	GOMEZ, RAMIRO		4.3 9	TREET ADDRESS				
STREET ADDRES	s 2747 W. 78TH STREET		4.4 (CITY-ST-ZIP			☐ Change	☐ Add

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 617, 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. STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE: X

HIALEAH FL 33016

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

Change

☐ Addition