FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N45796

(2)

DEBRILLIV. INC.

FILED Apr 27 1998 8:00am Secretary of State

O LOOK						
Principal Place of Business Mailing Address					T I SECTION ON DISCUSSION STATE STAT	4 BIBIT AIBIT AIBIT BIBIT BIBIT 1980
7725 S.W. 86TH SUTIE A1-316 MIAMI FL 33143		7725 S.W. 86TH ST. SUTIE A1-316 MIAMI FL 33143			 3. Date Incorporated or Qualified 10/29/1991 4. FEI Number 65-0305964 	Applied For
2. Principal Pl	lace of Business	2s. Mailing Address			5. Certificate of Status Desired	\$8.75 Additional
21		26				Fee Required
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State	9	City & State			7. Is this nonprofit corporation a homeow	
23		28			☐ Yes	No No
Zip	Country	Zip	Country		8. This corporation owes or has paid the	current year Intangible
24	9. Name and Address of Curren		30]		Personal Property Tax due June 30. 10. Name and Address of New Register 10. Personal Property Tax due June 30.	
			81	Name		
DIAZ. MADELINE B.			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
7725 S.W. 86TH ST.				Oli Cot i i i i	most (.o. cox value)	
SUITE A			83			
Miami fi	L 33143		84	City	-	85 Zip Code
11. Purcuant	to the provisions of Sections 617 050	2 and 617 1508. Florida Statuta	s the ebove	-nemed cor		
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga-	of Florida. Such change was au ations of, Section 617.0503, Flor	uthorized by rida Statutes	the corpora	rporation submits this statement for the purpos ation's board of directors. I hereby accept the	appointment as registered
SIGNATURE .	Signature, typed or printed name of registered age	ant and title if applicable. (NOTE:	: Registered Age	nt signature requ	Uired when reinstating) DA1	TE
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	TD	☐ DELETE	1.1 TITLE			Change Addition
NAME	DIAZ, MADELINE B.		1.2 NAME			
STREET ADDRESS	7725 S.W. 86TH ST., #A1-316	,	1.3 STREET			
CITY-ST-ZIP TITLE	MIAMI FL 33143	DELETE	1.4 CITY-S 2.1 TITLE	I-ZIP		Change Addition
NAME	BLANCHARD, JUDITH B		2.2 NAME			_ , , _
STREET ADDRESS	19750 S.W. 240TH ST.		2.3 STREET	ADDRESS		
CITY-ST-ZWP	HOMESTEAD FL 33031		2.4 CITY-5	ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE			Change Addition
NAME	TEITLER, DIANNE R		3.2 NAME			
STREET ADDRESS	7757 S.W. 86TH ST., #C-209	,	3.3 STREET			
CITY-ST-ZIP TITLE	MIAMI FL 33143	DELETE	3.4. CITY - 5 4.1 TITLE	a - ZIP		Change Addition
NAME		front provinces to	4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME	į		
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP		□ PE: ETC	5.4 City-S	r-zip		Change Addition
TITLE		☐ DELETE	6.1 TITLE			ET CHANNE ET MOOKIN
NAME			6.2 NAME	ADDRESS		
STREET ADDRESS			6.3 STREET			
CITY-ST-ZIP	certify that the information supplied w	ith this filing does not qualify for	f the exemp	tion stated in	n Section 119.07(3)(i), Florida Statutes. I furthe	or certify that the informatio
indicated officer or	on this annual report or supplements director of the corporation or the rect or Block 13 if changed, or on an atte	al annual report is true and accu eiver or trustee empowered to e chment with an address	urate and the execute this	at my signati report as rec	ture shall have the same legal effect as if mad- quired by Chapter 617, Florida Statutes; and ti	e under oath; that I am an hat my name appears in
SIGNAT	URE: Madeline	, D. Dia	4	A	Paril 16, 1998 (30.	5]442-3334