PROFIT **CORPORATION** ANNUAL REPORT

SIGNATURE



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

FILED 04 JUL -7 ; 1 2: 47 LE CHILLIAND LA STATE

DADE APPRAISALS INC. Principal Place of Business Mailing Address						TALLAHASSEE, FLUMUA		
						_		
								-
200 NW 25 Ave. 200 NW 25 Ave								
Higmi 12. 33125 Higmi 12. 33125						2 Data language and as Qualified	3a. Date of Last Repor	
11141111	, , <u>, , , , , , , , , , , , , , , , , </u>	7	ium iz		, — ,	3. Date Incorporated or Qualified	sa. Date of Last Repor	ı
2. Principal P	Place of Business	2a. Ma	ailing Address			4. FEI Number	Applied	d For
21	j,	26	_			45-0489487		plicable
Suite, Apt.	#, etc.	Su	ite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Addit	`
22		27				5. Certificate of Status Desired	Fee Require	ed
City & Stat	ie i	 1	ty & State			6. Election Campaign Financing	\$5.00 May	
23 Zip	Country	28 Zi	3	Country		Trust Fund Contribution	Added to Fe	
24	25	29		30	,	8. This corporation has liability for in Florida Statutes	angible tax under s. 199 Yes 🏻 No	1.032,
		s of Current Registere		100		10. Name and Address of New Regi		
				81	Name			
'	ODRACIR S	1. 10/600		82	Street Add	ress (P.O. Box Number is Not Acceptable	1	
	200 NW 2	5 AUE	£		ourcer / ladi	Address (F.O. Dox Number is Not Acceptable)		
H10 mi /2. 33135				83	1			
•	MIQMI 12	. 25/36		84	City		85 Zip Code	 3
11.0	#	007.0500 1.007	-500 Cl. 11 O.		<u> </u>		FL S E S S	
t office or r	registered agent, or both,	in the State of Florida.	Such change was a	authorized b	v the corporat	poration submits this statement for the pur tion's board of directors. I hereby accept	pose of changing its reg the appointment as regis	jistered stered
agent. La	ım familiar with, and acce	ept the obligations of, So	ection 607.0505, Flo	orida Statute	s.	· ·		
SIGNATURE	Signature typed or printed name	of registered agent and title if ag	olicable. (NOTE	E: Registered An	ent signalure reguir	red when reinstating)	DATE	
12.		FICERS AND DIRECTO		13.		ADDITIONS/CHANGES TO OFFICE		12
TITLE	PTD		DELETE	1.1 TITLE	,			Addition
NAME	ODRACIR 4. TO	1500	•	1.2 NAME		20003931	1538	
STREET ADDRESS	200 NW 26			1.3 STREE	T ADDRESS	80003931 07/19/040107100	ī5 **150.00	-
CITY-ST-ZIP	MIami R	33/34	Llociere	1.4 CITY-1	ST-ZIP			Calagra.
TITLE	 	<u> </u>	DELETE	2.1 TITLE		,	∐ Change L)	Addition
NAME CERCET ADDRESS	JOSE L. TOIETO			2.2 NAME				
STREET ADDRESS CITY-ST-ZIP	Miami f2	33/25		2.3 STREE 2. 4 CITY-	T ADDRESS	•		
TITLE .	MIGMI 72	22123	DELETE	3.1 TITLE	31-24		Change	Addition
NAME	i i	•		3.2 NAME		•	_ , _	
STREET ADDRESS			•	3.3 STREE	T ADDRESS			
CITY-ST-ZIP	g			3.4. CITY-	ST-ZIP			
TITLE	1	•	☐ DELETE	4.1 TITLE	1		Change	Addition
NAME	1			4. 2 NAME		•		
STREET ADDRESS]	·		i	T ADDRESS			
CITY - ST - ZIP			DELETE	4.4 CITY - 1	ST-ZIP)	Addition
TITLE NAME	å .		C DECEIE	5.1 TITLE 5.2 NAME		•	Change	Addition
STREET ADDRESS	1			l.	T ADDRESS			
CITY - ST - ZIP		t		5.4 CITY -	* * *			
TITLE	1		DELETE	6.1 TITLE	G1 - EII		Change	Addition
NAME	[6.2 NAME		-		
STREET ADDRESS					T ADDRESS	•		
CITY-ST-ZIP	<u>.</u>			6.4 CITY-	ST-ZIP	•		
14. I do here	by certify that the informa	tion supplied with this I	iling does not qualif	fy for the exe	emption stated	d in Section 119.07(3)(i), Florida Statutes.	I further certify that the	Ath, the
l am an o	officer or director of the co	orporation or the receive	er or trustee empow	ered to exe	cute this repo	t my signature shall have the same legal rt as required by Chapter 607, Florida Sta	street as it made under o stutes; and that my name	iaur; inat
appears	in Block 12 of block 13 if	changed, or en an atta	chrnent with an add	iress. 👵 🔻	3. 10 ²³ 5. 200	Page 41 Control Control		•

DONACIR J. Tolebo

DADE APPRAISALS, INC. 200 NW 25 AVENUE MIAMI, FLORIDA 33125

Miami, July 6, 2004

Division of Corporation Uniform Business Report P.O. Box 1500 Tallahassee, FI 32302-1500

Dear Sir:

This letter is to inform you that we never received the original form to be file before May 1st, 2004, because during year 2004 we were traveling in and out of Miami for business purposes, and must of our correspondence were lost in the mail. I will appreciate very much if you received and accept our check in the amount of \$ 150.00 as payment of the Corporation Uniform Business Report for year 2004.

I appreciate your help to resolve this matter.

Sincerely your:

Odracir I Toledo

President