FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortifam

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

TORRE ENTERPRISES, INC.

FILED Mar 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								
11985 US HWY 1 STE 204 11985 US HWY 1 STE 204 JUNO FL 33408 JUNO FL 33408			204			DO NOT WRITE IN THIS SPACE		
						Date incorporated or Qualified 01/18/1989		
6 Principal D	ace of Business	2a. Mailing Address				4. FEI Number		Applied For
2. Fillicipal Fi	ace of business	26				43-1399034	<u> </u>	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		5 Additional Required
22 City & State		City & State	·····			5 Floation Compains Financing		
23		28				Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Zip Country		Zip Country			8. This corporation owes or has paid the current year intangible			
24	25 29 30		30	<u> </u>		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
	9. Name and Address of Curren	t Hegistered Agent		81 N	Name		telen Main	
	RRE, ANN		L			JUNZ, SOPHIA		
	001 PALM GROVE PLACE LM BEACH GARDEN FL 33418			82 8	Street Address (P.O. Box Number is Not Acceptable) 12589 Woodmill Drive			
•			F	83				
			- 1	- 1		m Beach Gardens		33418
11. Pursuant t	o the provisions of Sections 607.050	2 and 607.1508, Florida State	ites, the ab	ove-n	amed corpo	ration submits this statement for the purp n's board of directors. I hereby accept the	oose of changin	g its registered
office or re agent I a	egistered agent, or both, in the State m familiar with, and accept the obligi	of Florida. Such change was atjous of, Section 607.0505, F	lorida Statu	ites.	ie corporatio	it's board of directors. Thereby accept if		as registered
SIGNATURE	Janhea	Juna/				α_{l}	26/40	<u> </u>
	Signature, typed or print dinamo of registered and OFFICERS AN			Agent s	signature required	when reinstating) ADDITIONS/CHANGES TO OFFICER	DATE /	TODE IN 12
12.	PD OFFICERS DAI	DELETE	13.	t		ADDITIONS/CHANGES TO OFFICER	Chan	
TITLE	TORRE, FRANK J.		1.7 IN					
NAME OTRACE ADDRESS	13901 PALM GROVE PLACE			mie Reët adi	nocee			
STREET ADDRESS		33418		Y-ST-Z	- 1			·
CITY-ST-ZIP TITLE	S	X DELETE	2.1 TIT			cretary	± Chan	ge Addition
NAME	TORRE, FRANK J.		2.2 NAME			ophia Junz		- –
STREET ADDRESS	13901 PALM GROVE PLACE			2.3 STREET ADDRESS		2589 Woodmill drive		
	PALM BCH GARDENS FL.			IY-SI-7		alm Beach Gardens, FL	33418	
CITY-ST-ZIP			3.1 TIT		<u> </u>	AIM DOGCII GGL GGIGT TE	Chan	ge Addition
NAME		_	3.2 NA					
STREET ADDRESS				REET AD	DRESS			
CITY-ST-ZIP				TY-\$T-				
TITLE		DELETE					Chan	ge 🔲 Addition
NAME			4. 2 NA	ME				
STREET ADDRESS			4.3 STF	reet ad	IDRESS			
CITY-ST-ZIP				Y-ST-2	ZIP	******		
TITLE		☐ DELETE	5.1 Tif	LE			☐ Chan	ge 🔲 Addition
NAME			5.2 NA	ME	Į			
STREET ADDRESS			5.3 ST	REET AD	ODRESS			
CITY-ST-ZIP				Y-ST-Z	ZIP		I Ta	
TITLE		☐ DELETE	6.1 TIT				Chan	ge Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 ST	REET AD	ORESS			
CITY-ST-ZIP		n	6.4 CIT	Y-ST-7	ZIP		a6a18 . Ab	AL 1 1242-2-1-1
14. I hereby o	certify that the information supplied w	ith this filing does not qualify	for the exe	mptio	n stated in S	Section 119.07(3)(i), Florida Statutes. I fur	rtner certify that	the information

indicated on this annual report or supplifing final 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 emprowered 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 attachment with any address.

SIGNATURE:

2/17/98

561-775-3788