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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P92000004524 (4)

Principal Place of Business Mailing Address 11278 NW 6TH TER MIAMI FL 33172 MIAMI FL 33172					<u>.</u>	DO NOT WRITE IN THIS SPACE		
						3. Date incorporated or Qualified		
						11/09/1992		
2. Principal Pl	2. Principal Place of Business 2a. Mailing Ad					4. FEI Number	Applied For	
21		26				65-0374485	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc					.75 Additional ee Required	
City & State		City & State					.00 May Be Ided to Fees	
Zip	Country	Zip		Country		8. This corporation owes or has paid the current ye		
24	25	29	30]			Personal Property Tax due June 30. Yes	No No	
	9. Name and Address of Curre	nt Registered Agent		-		10. Name and Address of New Registered Agent		
Marrero, gilberto jr				61	Name			
11278 NW 6TH TER				62 Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33172								
				83				
				84	City	FL 85	Zip Code	
11. Pursuant i office or re agent. I as	o the provisions of Sections 607.05 ogistered agent, or both, in the Stat in familiar with, and accept the oblig	02 and 607.1508, Florida 5 e of Florida. Such change gations of, Section 607.050	statutes, the was autho 5, Florida	ne above prized by Statutes	named c the corpo	corporation submits this statement for the purpose of chang oration's board of directors. I hereby accept the appointment	ing its registered nt as registered	
SIGNATURE								
	Signature, typed or printed name of registered as				nt signature re	equired when reinstating) DATE	OTO DO 111 40	
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECT		
TITLE	PD	- Deten		1.1 TITLE	1	Ļ Cn	nific T Woolliou	
NAME	ALASA ANNI ATIA TRANSPORTA		1.2 NAME	1000000				
STREET ADDRESS	1 44444 54			1.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	MINNI FL	DELETI		1.4 CITY-S 2.1 TITLE	I-ZIP	☐ Ch	ange Addition	
NAME				2.1 IIILE 2.2 NAME		L CII	u-do T Vitalitati	
STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS					
CITY-ST-ZIP TITLE			2.4 CITY-ST-ZIP 3.1 TITLE		∏ Ch	ange Addition		
NAME				3.2 NAME	ļ		migo	
STREET ADDRESS				3.2 NUME 3.3 STREET	Annpece			
CITY-ST-ZIP		DELET		3.4, CITY - S 4.1 TITLE	51 · ZIP	Ch	ange Addition	
***** J		Land Villi		7.1 MILE	,			

6.4 CITY-ST-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 on an attachment with an address.

SIGNATURE:

04-15-98

1305|226-4695

I. 2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

DELETE

DELETE

Change

☐ Change

Addition

☐ Addition

FILED

Apr 28 1998 8:00am

Secretary of State