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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 31 1998 8:00am Secretary of State

DOCUMENT # P9200004821 (4) EN-KI CORPORATION											
Principal Place of Business Mailing Address										F TOUR LEGIS AND FORM STATE STATE BOTH BOTH BOTH BOTH BOTH BOTH BOTH BOTH	
7201 S.W. 84 CT. 7201 S.W. 84 CT.									ł		
MIAMI FL 33143 MIAMI FL 33143											
						DO NOT WRITE IN THIS SPACE					
										3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address										11/16/1992 4. FEI Number Applied For	
21	ACO OI DOSII	1033		26						4. FEI Number Applied For Not Applied Solution Not Applied Not	
Suite, Apt.	#, etc.				ite, Apt. #, etc.					S8 75 Additional	
22				27						5. Certificate of Status Desired Fee Required	
City & State	9			City & State						6. Election Campaign Financing \$5.00 May Be	
23	23				28					Trust Fund Contribution Added to Fees	
Zip		_	Country	Zi	р		untry	1		This corporation owes or has paid the current year Intangible	
25					29 30				1	Personal Property Tax due June 30. Yes No	
										10, Name and Address of New Registered Agent	
YNASTRILLA, ALEXANDER -720/-7501-6.W. 84 COURT											
1501-5.W. 84 CUURI							82 Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33143 /							83				
11								<u></u>			
1)					8			City		FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named conflice or registered agent of potty in the State of Florida. Such change was authorized by the corporagent. I am familiar with, and we cept to obligations of, Section 607.0505, Florida Statutes.								corpor			
office or r	egistered ag m familiar w	ith au	A poth, in the State	of Florida. tions of S	Such change was	s authoriza Florida Sta	ed by	y the corpo	oration	n's board of directors. I hereby accept the appointment as registered	
SIGNATURE			X	(P.	00.000,	1 101100 011		v .		2/2/98	
SIGNATURE	Signature, typido	or print	of rume of legislered ager	cand tille diap	plicable. (N	OTE: Register	ed Age	ent signature r	equired	when reinstating) OATE	
12.	- BUTO		OFFICERS AND	DIRECTO		13				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DVTS	311 1 A	ALBXANDER A		☐ DELETE	•	tiTL E	- 1		☐ Change ☐ Addition	
NAME	7520 S.				1.2 NAME						
STREET ADDRESS	MIAMI F							ADDRESS			
CITY-ST-ZIP TITLE	DP DP	L 00	170		DELETE		CITY-S TITLE	51 - ZIP		☐ Change ☐ Addition	
NAME	YNASTRILLA, ANTINIO J				2.2 %					_ only	
	STREET ADDRESS 7201 S.W. 84 COURT							ADDRESS			
	CITY-ST-ZIP MIAMI FL 33143							ST-ZIP		j. 6 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -	
TITLE					☐ DELETE		TITLE	<u> </u>		☐ Change ☐ Addition	
NAME						3.2	NAME				
STREET ADDRESS						3.3	STREET	ADDRESS			
CITY-ST-ZIP						3.4.	CITY-	ST - ZIP			
TITLE					DELETE	4.1	TITLE			☐ Change ☐ Addition	
NAME						4. 2	NAME				
STREET ADDRESS						4.3 3	STREET	ADDRESS			
CITY-ST-ZIP							CITY-8	T- ZIP			
TITLE					DELETE		TITLE			Change Addition	
NAME							NAME				
STREET ADDRESS						•		ADDRESS			
CITY-ST-ZIP TITLE					DELETE		CITY-S	ST-ZIP		☐ Change ☐ Addition	
					DLCCIE					C Change C Addition	
NAME STREET ASSOCIACE			3				NAME STORES	ADDDEEC			
STREET ADDRESS		- 1	1					ADDRESS			
CITY-ST-ZiP	ertify that th	e infa	mation supplied wil	h this filing	does not qualify	for the A	city - s cemp	tion stated	d in Se	ection 119.07(3)(i). Florida Statutes. I further certify that the information	
indicated	on this annu	ial re	ort or supplemental	nnual re	ort is true and a	ccurate	nd th	at my sign	ature	ection 119.07(3)(i), Florida Statutes. I further certify that the information shall have the same legal effect as if made under oath; that I am an an legal by Chate 607. Elegal of Statutes and that may be considered to the control of the control	

indicated on this annual report or supplemental through 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 colororation or the receive or trustne empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged for on an attachizent withfan address.

CICMATURE

3/2/98

(305) 595-0503