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

**PROFIT** CORPORATION ANNUAL REPORT

1998

14. Thereby certify that the information supplied indicated on this annual report or supplied officer or director of the corporation or the Block 12 or Block 13 if changed or on in



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Mar 27 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporatio	n Name SUA INC		)UUUU /	W26 (7)				C HABRICAN THE HOUSE HIGH BARRICAN CARRICA			
Principal Place of Business Mailing Address							·				
•											
16735 123RD TERR N 16735 123RD TERR.  JUPITER FL 33478 JUPITER FL 33478											
US								DO NOT WRITE IN THIS SPACE			
1								3. Date Incorporated or Qualified			
2. Principal Place of Business 2a. Mailing Address								11/20/1992 4. FEI Number	-	I IAr	oplied For
21			<del>}</del> 1	26				65-0413069			ot Applicable
Suite, Apt.	#, etc.			Suite, Apt. #, etc.						\$8.75	Additional
22			27					5. Certificate of Status Desired	-	Fee Re	equired
City & State	ө		<b>├</b>	City & State			6. Election Campaign Financing	_		May Be	
23 County								Trust Fund Contribution			to Fees
Zip		Country	<del></del>	<u> </u>		y		This corporation owes or has p     Personal Property Tax due Jun			angible No
24 25 25 Name and Address of				29 30 30 The Registered Agent				10. Name and Address of New R			2 140
ALL					81	īŢ	Name		<del> </del>		
ALVAREZ, CARLOS A 16735 123RD TERR.					82	+	Ctroot Addro	on (D.O. Poy Number in Not Assente	hlal		
JUPITER FL 33478							Street Addre	dress (P.O. Box Number is Not Acceptable)			
OU RELITE SOUTO					83	1					
						+	City			<b>85</b> Zip	Code
							•	FL			
office or n	edistered a	aent, or both, in the	<ul> <li>State of Florida</li> </ul>	.1508, Florida Statu . Such change was Section 607.0505, Fl	authorized b	v t	the corporatio	oration submits this statement for the on's board of directors. I hereby acco	purpose ept the ap	of changing it opointment as	s registered registered
SIGNATORE	Signature, type	d or printed hame of regist	<del></del>		TE Registered Ag	jeni	I signature required	d when reinslating)	DATE		
12.		OFFICER	RS AND DIRECT		13.			ADDITIONS/CHANGES TO OFF	ICERS A		Addition
TITLE					1.1 TITLE	1.1 THEE 1.2 NAME				L Change	LT ADORION
NAME ALVAREZ, CARLOS A STREET ADDRESS 16735 123 TERRACE							DDDECC				
							DDRESS				
CITY-ST-ZIP	TITLE VD			DELETE			- ZIP	<del></del>		Change	Addition
NAME				2.2		2.2 NAME					_
STREET ADDRESS							DDRESS				
CITY-ST-ZIP SANTO DOMINGO DP							- ZIP				
TITLE	D			☐ DELETE	3.1 TITLE					☐ Change	Addition
NAME	ALVARE	EZ, PEDRO O			3.2 NAME						
STREET ADDRESS		/. 20TH AVE. #22	21		3.3 STREE	T A	DORESS				
CITY-ST-ZIP		FL 33012		Del pre	3.4. CITY-		- ZIP				g datata -
TITLE	D			☐ D€LET€	4.1 TITLE					L Change	Addition
NAME		A, FERNANDO			4. 2 NAME		002000				
STREET ADDRESS		W 101ST AVE.			4.3 STREE						
CITY-ST-ZIP TITLE		FL 33176		DELETE	4.4 CITY - 5.1 T/TLE	•••••	- 2112	W		Change	Addition
NAME	D PDIETO	, LUIS E		La DECETE	5.1 TRILE 5.2 NAME					snango	
STREET ADDRESS		/, LOIS E /. 20TH AVE. #24	123		5.3 STREE		DDRESS				
CITY-ST-ZIP		r. 2016 AVE. #24 FL 33012	120		5.4 CITY-						
TITLE	DS	L 00016		DELE <b>te</b>	61 TITLE					Change	Addition
NAME		ANQUI, JAVIER R			6.2 NAME						
STREET ADDRESS		ROYAL POINCIA		•	6.3 STREE		DDRESS				
CITY-ST-ZIP		SPRINGS FL 331		-	6.4 CITY -	ST-	- ZIP				

hed with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information injental 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 receiver or trustee emprovered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

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