COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998

City & State

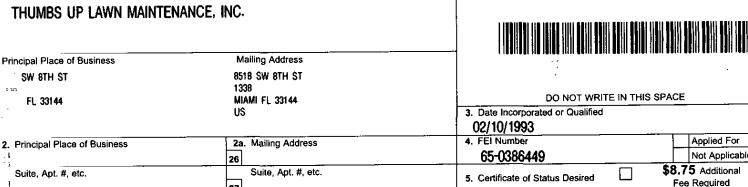


FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000010000 (6)



8. This corporation owes or has paid the current year Intangible Zip Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent SAVANY-MARRERO, KARLA 14841 SW 155TH TERR **MIAMI FL 33187**

City & State ____

28

Zip

| 10. Name and Address of New Registered Agent | | | | | | | |
|--|--|--|--|--|--|--|--|
| 31 | Name Karla Savany-Marrero | | | | | | |
| 32 | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| 33 | | | | | | | |
| _ | log 7:- Code | | | | | | |

6. Election Campaign Financing

Trust Fund Contribution

FILED

Jul 16, 1998 8:00 am Secretary of State

11. Pursuant to the provisions of sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered

Country

| office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607,0505, Florida Statutes. | | | | | | | |
|--|---|--------|-----------------------------|---|-----------------------|--|--|
| agent. I a | am familiar with, and accept the obligations of, sections | | a Statutes. ¿ SQUANY - N | | 1/7/98 | | |
| SIGNATURE . | Signature, typed or printed name of registered agent and title if applica | | | are required when reinstating) DA | ITE | | |
| 2. OFFICERS AND DIRECTORS | | | 13. | ADDITIONS/CHANGES TO OFFICER | S AND DIRECTORS IN 12 | | |
| TITLE | Р | DELETE | 1.1 TITLE | Karla Savany-Marrero XO290 S.W. 180 Street | Change Addition | | |
| IAME | SAVANY-MARRERO, KARLA | | 1.2 NAME | Karla S.W. 180 Street | ۲ | | |
| TREET ADDRESS | 14841 SW 155TH TERR | | 1.3 STREET ADDRESS | miami, Florida 3318 | 7 | | |
| (ITY-ST-ZIP | MIAMI FL | | 1.4 CITY-ST-ZIP | | | | |
| TILE | V | DELETE | 2.1 TITLE | Miguel A. Marrero 2020 S.W. 180 Stree Miami, Florida 3318 | Change Addition | | |
| IAME | MARRERO, MIGUEL A | | 2.2 NAME | Migue In 180 Street | <i>t</i> - , , | | |
| STREET ADDRESS | 14841 SW 155TH TERR | | 2.3 STREET ADDRESS | 2020 500000 2218 | <u> </u> | | |
| CITY-ST-ZIP | MIAMI FL | | 2.4 CITY-ST-ZIP | MIGMI, FIDITED 3310 | <u> </u> | | |
| TITLE | | DELETE | 3.1 TITLE | | Change Addition | | |
| NAME | | | 3.2 NAME | | - | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | | | |
| CITY-ST-ZIP | <u> </u> | | 3.4 CITY-ST-ZIP | | | | |
| ritl e | | DELETE | 4.1 TITLE | | Change Addition | | |
| NAME | | | 4.2 NAME | | | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | | | | |
| TITLE | | DELETE | 5.1 TITLE | | Change Addition | | |
| NAME | | | 5.2 NAME | | | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | | | |
| CITY-ST-ZiP | | | 5.4 CITY-ST-ZIP | | | | |
| TITLE | | DELETE | 6.1 TITLE | | Change Addition | | |
| NAME | | | 6.2 NAME | | | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | | | |

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 receiper 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, ovon an attachment with an address.

SIGNATURE:

Applied For

\$5.00 May Be

Added to Fees

Not Applicable