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

DOCUMENT # P93000010088 (1)

FILED Apr 03 1998 8:00am Secretary of State

B.C.(C. ENTERPRISES OF MIAI	MI, INC.	· ,		
Principal Place of Business Mailing Address			E LAMBIAMU SIM IBING WING ERINI MANU (CON I ERI	BF 11841 88411 88481 18484 1841 1881	
1414 NW 107 AVE 400		1260 NW 72ND AVE. MIAMI FL 33126			
MIAMI FL 33126 US			DO NOT WRITE IN TH	IS SPACE	
ŲS				3. Date Incorporated or Qualified 02/03/1993	
2. Principal Place of Business 2a. Mailing Address			4. FEI Number	Applied For	
21		26		65-0426973	Not Applicabl
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & Ciato			Fee Required
13		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
ו די	25	29	30	This corporation owes or has paid the Personal Properly Tax due June 30.	ves No
 	9. Name and Address of Curr		190	10. Name and Address of New Registers	
	BRODIE, SIDNEY Z		81 Name		
	7270 NW 12TH ST.		82 Street Ad	Idress (P.O. Box Number is Not Acceptable)	
	MIAMI FL 33126		OL OTICET NO	roress (1.0. Box radiniber is radi Acceptable)	
			83		
			84 City		■ 85 Zip Code
			'	prporation submits this statement for the purpose	L I I
SIGNATURE		AND DIRECTORS	TE Registered Agent's griature rec	ADDITIONS/CHANGES TO OFFICERS A	
ITLE	DP CAPO, GERARDO	☐ DELETE	1.1 TITLE		Change Additio
AME	1000 (811 -015 110		1.2 NAME		
TREET ADDRESS	MIAMI FL 33126		1.3 STREET ADDRESS		
ITLE	DVS	☐ DELETE	1.4 CHY-ST-ZIP 2.1 TITLE		Change Addition
AME	CAPO, JULIO C		2.2 NAME		Crisings rabito
TREET ADDRESS	ARRA SELL TRANSPORTS		2.3 STREET ADDRESS		
ITY-ST-ZIP	MIAMI FL 33126		2 4 CITY-ST-ZIP		
ITLE	DVT	☐ DELETE	3.1 TITLE		Change Additio
AME	BERG, DONALD L		3.2 NAME		
TREET ADDRESS	1260 NW 72ND AVE.		3.3 STREET ADDRESS		
TY-ST-ZIP	MIAMI FL 33126		3 4. CHTY - ST - ZIP		
TLE		☐ DELETE	4 1 THILE		Change Addilio
AME			4. 2 NAME		
TREE1 ADDRESS			4.3 STREET ADDRESS		
11Y-ST-2IP		□ Dtifre	4.4 CITY-ST-ZIP		
TLE		☐ DELETE	5.1 THLE		☐ Change ☐ Additio
AME			5.2 NAME		
TREET ADDRESS			5.3 STREET ADDRESS		
ITY-ST-ZIP ITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
AME		□ DEEK 1E	D.I NILE		L Change L Addition
TENE			G 2 NAME		
PSAROOM TRAKE			6.2 NAME		
REET ADDRESS			6.2 NAME 6.3 STREET ADDRESS 6.4 CHY - ST - ZIP		

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. 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 because the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation or the receive Block 12 or Block 13 if changed, or on an analysis of the corporation or the receive Block 12 or Block 13 if changed, or on an analysis of the corporation or the receive