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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000013253 (8)

ELSA LOPEZ DESIGN ASSOCIATES, INC.

Principal Place of Business Mailing Address

12754 S.W. 44TH TERRACE 12754 S.W. 44TH TERRACE MIAMI FL 33175 MIAMI FL 33175

## FILED Feb 27 1998 8:00am Secretary of State



MIAMI FL 33175 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/12/1993 2. Principal Place of Business Applied For 2s. Mailing Address 21 26 65-0394160 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional ₩ 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country  $Z_{\rm ID}$ Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LOPEZ, ELSA 12754 S.W. 44TH TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33175** 83 84 City Zip Code 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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typiid or printed name of registered agent and title 4 applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change TITLE DELETE 1.1 TITLE Addition NAME LOPEZ, ELSA 1.2 NAME STREET ADDRESS 12754 S.W. 44TH TERRACE 1.3 STREET ADDRESS **MIAMI FL 33175** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE LOPEZ, MARTIN NAME 2.2 NAME 12754 S.W. 44TH TERRACE STREET ADDRESS 23 STREET ADDRESS MIAMI FL 33175 CITY-ST-ZIP 2 4 CITY-ST-ZIP ☐ DELETE Change Addition TITLE 3.1 TITLE 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 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY+ST-ZIP DELFTE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY - ST - ZIP CITY - 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. 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 trusted 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: COLONIE PURSINONIT FISA L. LOREZ 2-23-98/30/705-1166