PROFIT CORPORATION ANNUAL REPORT 1998	_			FILED Jan 20 1998 8:00am	
		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham			
	Socrotary of State DIVISION OF CORPORATIONS		IONS	Secretary of State	
DOCUMENT # P93000017	374 (8)				
EUGENIO MARTINEZ-HUET, INC.					
Principal Place of Business Mailing				-^T TAUDANEDA NA KUTUU NAKA DENA UNIN ANDA ANDA ANDA ANDA ANDA ANDA ANDA A	
			DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified 03/08/1993	
	iling Address	· · · · · · · · · · · · · · · · · · ·		4. FEI Number	Applied For
21 26 26 Suite, Apt. #, etc. Sui	26 Suite, Apt. #, ctc.			65-0397681 5. Certificate of Status Desired \$8.7	Not Applicable 75 Additional
22 27 27 City & State City	27 City & State			Fe	e Required
23 28		,	<u> </u>		00 May Be led to Fees
Zip Country Zip 24 25 29		Countr 30	ý	8. This corporation owes or has paid the current year Personal Property Tax due June 30. X Yes	r Intangible
9. Name and Address of Current Registered	d Agent	81	Name	10. Name and Address of New Registered Agent	
MARTINEZ-HUET, EUGENIO 9572 SW 57 ST		82		ess (P.O. Box Number is Not Acceptable)	
MIAMI FL 33173		83			
		84		85	Zip Code
11. Pursuant to the provisions of Sections 607.05/02 and 607.1	OV. Liorido Statut			PL	
 Pursuant to the provisions of Sections 607.0002 and 607.1 office or registerod agent, or both, in the State of Florida. S agent Lam familiar with, and accept the obligations of, Sec. 	uch change was a	authorized b	v the corporati	on's board of directors. I hereby accept the appointment	l as registered
SIGNATURE	wake (MG)	L - funcistered Ar	ont signature require	d when reinstating) DATE	
12. OF LICE RS AND DIRECTOR	łS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIREC	A
NAME MARTINEZ-HUET, EUGENIO	DILETE	1.1 TITLE 1.2 NAME	(L.] Cha	nge 🗌 Addition 😜
STREET ADDRESS 526 W 50TH ST		1.3 STREE	T ADDRESS		
CITY-ST-ZIP MIAMI BCH FL	DELETE	1.4 CITY - 2.1 TITLE	<u>\$1-7IP</u>	Char	nge Addition
NAME		2.2 NAME	1		
STREET ADDRESS CITY-ST-ZIP		2.3 STREE 2.4 CH1Y-	T ADDRESS ST-ZIP		
Inte	DELETE	3.1 THLE		Char	ige 🔲 Addition
NAME STREET ADDRESS		3 2 NAME 3 3 STREET	1 ADDRESS		
CITY-ST-ZIP		3 4. CITY -			
TITLE	L DELETE	4.1 111LE 4. 2 NAME		L Char	ige L_J Addition
STREET ADDRESS		4.3 STREE	I ADDRESS		
City-SI-ZIP	DELETE	4.4 CITY- 5	ST-ZIP	Char	ge Addition
NAME	—	5.2 NAME		_	·
STREET ADDRESS		5 3 STREET 5.4 CITY - S	I ADDRESS		Ì
CITY-ST-ZIP TITLE	DELETE	6.1 TITLE		Char	ige 🔲 Addition
NAME STREET ANDRESS		6.2 NAME			
STREET ADDRESS CHTY-ST-ZIP		6.3 STREET 6.4 CHY - 5	S1-ZIP		
14. I hereby certify that the information supplied with this filing indicated on this annual report or supplemental animation officer or director of the corporation or the receiver or Just Block 12 or Block 13 if changed, or on an attacparity with	does not qualify to	or the exemp urate and th	otion stated in S lat my signatur	Section 119.07(3)(i), Florida Statutes. I further certify that shall have the same legal effect as if made under oath and but chapter 2027 that State State State	the information ; that I am an
Block 12 or Block 13 if changed, or on an attachment with	an and a store	execute this	report as requ	ieo oy Chapter 607, Fiorida Statutos; and that my name	appears in