## 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

## **FILED** Apr 30 1998 8:00am Secretary of State

DOCUMENT # P93000028098 (0)											
	CSA, INC			•							
Principal Place of Business				Mailing Address				1   18011084 110 19108   11111 8844/ 08111 00	III BAILS HEDI	I I I I I I I I I I I I I I I I I I I	II FOIL IRA
20000 FRANJO ROAD MIAMI FL 33189-1815				20000 FRANJO ROAD MIAMI FL 33189-1815							
								DO NOT WRITE IN THIS SPACE			
									IN THIS S	SPACE	
								3. Date Incorporated or Qualified			
2. Principal P	lace of Busin	noss	[ 2a. N	Mailing Address				<b>04/14/1993 4.</b> FEI Number		IAT	plied For
21				26				65-0443273		<u> </u>	of Applicable
Suite, Apt. #, etc				Suite, Apt. #, etc.				_		\$8.75	
22				27				Certificate of Status Desired	L-J	Fee Re	
City & State				City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added I	
Zip	<u>├</u>			Zip Cou				8. This corporation owes or has pa	id the cur	rent year Int	angible
24 25 9. Name and Address of Current			29   Co					Personal Property Tax due June 30			
			<b></b>	rea Agent		91	Name	10. Name and Address of New He	gistered	<u> 1gent</u>	
MOLANO-FERMIN, EVANGELINA 400 N.W. 138 AVE.								Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33182				82 Stree				ood (			
					Ľ						]
						84	City		FL	<b>85</b> Zip (	Code
office or re	egistered ag	ont, or both, in th	e State of Florida	.1508, Florida Stat Such change wa Section 607.0505, l	s authorized	by t	named corp the corporat	oration submits this statement for the pion's board of directors. I hereby acceptions	ourpose of of the app	changing its pintment as	s registered registered
SIGNATURE	Strengtue breat	Of prated has a Of regi	better research and tilliant o	and the 18th	Off Barneterod	Agent	e innaturu teoriir	ed when reinstaling)	DATE		
12.			RS AND DIRECT		13.			ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12
TITLE	P		······································	☐ DELETÉ	1 1 TITL	E				☐ Change	Addition
NAME		S, JULIO A			1.2 NAN	AE					
STREET ADORESS	reet adoress 20000 FRANJO RD.			1.3 \$7			DDRESS				. [
CITY - ST - ZIP	MIAMI FI	_ 33189			1.4 CITY	r-st-	ZIP				
TITLE	S			☐ DELETE	2.1 TITL	.E				☐ Change	Addition
NAME	BERRIOS				2.2 NAN	Æ					
STREET ADDRESS							Doress				
CITY-ST-ZIP	MIAMI F	. 33189		DELE 1E	2 4 CIT		- ZIP			Change	Addition
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NAME					6.2 NAX	AE.	1				
STREET ADORESS					6 3 S1R	EET AI	DDRESS				1
CITY-ST-ZIP			·		6.4 City	/-ST-	ZIP	Castina 140 07/2\/it Elecida Ctatutas I			

r nereby certify that the information supplied with this filling 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 suppliering all 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 (ghanged, or on an attachment with an address).

305-238-0123