## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1**9**98

DOCUMENT # P93000029456 (9)

1. Corporatio	in Name D PARKING		0002	0 100 (0)						
Principal Place of Business Mailing Address							a todaindt ing mind einte daste deren a	18111 BONG HEIS 1811	/	WIE MAIL COM
% ARTURO GONZALEZ % ARTURO GONZALEZ										
8909 COLLINS AVENUE   BAL HARBOUR FL 33154				9909 COLLINS AVENUE BAL HARBOUR FL 33154			DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified 04/17/1993			
2. Principal P	lace of Busines	55	2a.	28. Mailing Address			4. FEI Number		T A	pplied For
21				26			65-0401831		N	ot Applicable
Suite, Apt. #, etc.				Suite, Apl. #, etc.			5. Certificate of Status Desired	□ \$		Additional equired
City & State				City & State			6. Election Campaign Financing			May Be
23				28			Trust Fund Contribution			to Fees
Zip	Country			7ip Cour		У	8. This corporation owes or has p	<del></del>	-	_ *
25 29				ared Agent	30	Personal Property Tax due June 30. Yes   10, Name and Address of New Registered Agent				_l No
9. Name and Address of Current Registered Agent GONZALEZ, ARTURO						Name	10. Name and Address of New A	edistated wilet	11	
9909 COLUNS AVENUE					02	Ctroot Aride	rose (D.O. Boy Number in Not Accepts	hla\		
BAL HARBOUR FL 33154					62	82 Street Address (P.O. Box Number is Not Acceptable)				
					83				-	
						City		FL 85	5 Zip	Code
11. Pursuant	to the provision	ns of Sections 607.	0502 and 60 ate of Florida	7.1508, Florida Statu a. Such change was	les, the abov authorized b	e-named corp v the corporal	poration submits this statement for the lion's board of directors. I hereby acce		nging in ment as	ts registered
agent. I a	ım familiar with,	and accept the of	oligations of,	Section 607.0505, FI	lorida Statute	S.	, , , , ,	.,		
SIGNATURE	Signature, typed or	printed name of registered	agent and little if	applicable (NO	Tt Registered Ag	ent signature requir	ired when reinstating)	PATE	<del></del>	
12.		<del></del>	AND DIREC	RECTORS 13.			ADDITIONS/CHANGES TO OFFI			
TITLE	D	T ADTIDO	☐ DELETE	1.1 TITLE			Ц	Change	Addition	
NAME GONZALEZ, ARTURO STREET ADDRESS 9909 COLLINS AVENUE				1.2 NAME						
MAI LIADDOLID EL ANTEA					1.3 STREET	i				
CITY-ST-ZIP TITLE	DATE INVITE	DELETE	1.4 CITY-5	51-217			Change	Addition		
NAME					2.2 NAME				•	_
STREET ADDRESS				2.3 STREET ADDRESS						
CITY-ST-ZIP					2.4 CITY-ST-ZIP					<u> </u>
TITLE	DELE				3.1 TITLE				Change	Addition
NAME					3.2 NAME	Libbosos				
STREET ADDRESS						T ADDRESS				
CITY-ST-ZIP TITLE	<del></del>			DELETE	3.4. CITY - 4.1 TITLE	51-207			Change	Addition
NAME				_	4. 2 NAME			<u></u>	•	
STREET ADDRESS	,					T ADDRESS				
CITY-ST-ZIP	- <u>-</u> -				4.4 CITY- S	ST - ZIP				
TITLE				☐ DELETE	5.1 TITLE				Change	Addition
NAME					5.2 NAME					
STREET ADDRESS					5.3 STREET					
CITY-ST-ZIP TITLE	<del>-</del>		····	DELETE	6.1 TITLE	SI-ZIP			Change	Addition
NAME					6.2 NAME	}		_		
STREET ADDRESS						I ADDRESS				

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 supply modulal 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 of the ecciver or trustee employered 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.

**FILED** 

Apr 23 1998 8:00am

Secretary of State