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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000032369 (9)

MAYTEMAR CORPORATION

Principal Place of Business Mailino Address

## **FILED** May 14 1997 8:00am Secretary of State



7380 SW 42ND ST MIAMI FL				7380 SW 42ND ST MIAMI FL 33155-4508							
							3. Date Incorporated or Qualified 05/04/1993	3a. Date of Last Report 05/01/1996			
2. Principal Place of Business				2a. Mailing Address				4. FET Number	<b>-</b>		Applied For
21				26				65-0407865			Not Applicable
Suite, Apt. #, etc.				Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State				City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip <b>24</b>	Country Zφ 25 29					untry	,	No corporation has liability for intangible tax under s. 199,032,     Florida Statutes     Yes    No			
	9. Name an	d Address of Cu	ırrent Regi	stered Agent	30	1		10. Name and Address of New Re	gistered	Agent	
	IO, JUAN R SI					81	Name				
7380 S.W. 42ND ST. Miami Fl 33155						82	Street Add	dress (P.O. Box Number is Not Acceptab	le)		
						83					
						84	City		FL	85 2	/ip Code
11. Pursuant office or r agent. I a	to the provisions egistered agent m familiar with,	s of Sections 607 , or both, in the S and accept the c	7.0502 and State of Floo phligations	607.1508, Florida Sta rida Such chango wa of, Section 607.0505,	lutes, the a is authorize Florida Sta	boved by	e-named co y the corpori s.	rporation submits this statement for the pation's board of directors. I hereby accept	urpose of the app	changin ointment	ig its registered as registered
SIGNATURE	Conn. or hand or	noted name of register		a. Laurinotta	EVIL Denistar			evired when reinstalling)	DATE		
12.	2:0-ratore types or to		AND DIRE		13.		ent signature red	ADDITIONS/CHANGES TO OFFIC		DIREC'	10BS IN 12
TITLE	PD			☐ DELETE	1.1 T					Chan	
NAME	CARO, JUAI				1.2 ħ	IAME					
STREET ADDRESS	7380 S.W. 4				1.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 3	3155					61 - 7)P			<del></del>	
TITLE	VD CARO IIIAI	M D ID		DELETE	2 1 T					Chan	ge L. Addition
NAME	CARO, JUAI 7380 S.W. 4				22 N						
STREET ADDRESS	MIAMI FL 33						ADDRESS				
CITY-ST-ZIP TITLÉ	ST			DELETE	3.1 1		\$1-719			☐ Chan	ge Addition
NAME	CARO, TER	ESITA			3.21						
STREET ADDRESS	7380 S.W. 4				3.3 5	31RE E 1	I ADDRESS				
CITY-ST-ZIP	MIAMI FL 33	3155			3.4.	CITY-	ST-70°				
TITLE			· /	DELETE	4.1 1	ITLE				Chan	ge Addition
NAME					4. 2	NAME		-			
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TITLE				☐ DELETE	5.17					Chan	ge L Addition
NAME OVERT ADDRESS					5.21		LADONICO				
STREET ADDRESS							I ADORESS				
CITY-ST-ZIP				DELF1E	5.4 ( 6.1 T		61-2IP			Chan	ge Addition
NAME				v)t	ı.	IAME				Viidii Viidii	a Transmon
STREET ADDRESS							1 ADDRESS				
CITY-ST-ZIP							ST-7IP				
	by certify that It	e information sur	nntied with	this filmo doos not ou				ed in Section 119 07(3)(i) Florida Statute	s Lifurthe	r cortify t	hat 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 16 if changed, or only in attachment with an address.