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

Mailing Address

P.O. BOX 66-1109

MIAMI FE 93166

US

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P93000036953

1. Corporation Name

CHOICE OF YOU INC.

Principal Place of Business

MIAMI SPRINGS FL 33266

5453 NORTHWEST 72ND AVENUE

4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 5890 N.W. 38 ST. 5890N.W.38 Not Applicable 65-0412748 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired  $\Box$ Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 Country 33166 8. This corporation owes the current year Intangible Country SA □No ☐ Yes 30 Personal Property Tax. 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name GIL, FRANCISCO J 5453 HORTHWEST TOND WENDE. 5890 N.W. 38ST. 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33166** 83 Zip Code 84 City 85 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicab ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ☐ Change Addition DELETE 1.1 TITLE TITLE GIL, FRANCISCO J 1.2 NAME NAME 5890 NORTHWEST 38TH STREET 1.3 STREET ADDRESS STREET ADDRESS VIRGINIA GARDENS FL 33166 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE GIL. ISABEL 2.2 NAME NAME 5890 NORTHWEST 38TH STREET 2.3 STREET ADDRESS STREET ADDRESS. VIRGINIA GARDENS FL 33166 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ DELETE 3.1 TITLE TITLE GIL, IVETTE L 3.2 NAME NAME 5890 NORTHWEST 38TH STREET 3.3 STREET ADDRESS STREET ADDRESS VIRGINIA GARDENS FL 33166 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF Addition DELETE Change 5.1 TITLE TITLE 5.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADORESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

62 NAME

☐ DELETE

SIGNATURE:

Block 12 or Block 13 if changed,

NAME

 $T(T) \in$ 

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NG OFFICER OR DIRECTOR

14. I hereby 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 trustee 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 with all other like empowered.

☐ Addition

FILED Mar 04, 1999 8:00 am

**Secretary of State** 

03-04-1999 90075 033 \*\*\*150.00

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualifed

05/24/1993

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