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

CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000048162 (0)

Principal Place of Business	Mailing Address	
2762 NW 62ND STREET MIAMI FL 33147-7662 US	2762 NW 62ND ST MIAMI FL 33147-7662 US	
2. Principal Place of Business	2a. Mailing Address	
n	26	
Suite Ant # etc	Suite Ant # etc	

**FILED** May 08 1998 8:00am Secretary of State

DINAH INVESTMENTS CORP. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/09/1993 4. FEI Number Applied For 65-0424409 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent g, Name and Address of Current Registered Agent 81 Name GONZALEZ, RENE 2762 NW 62ND STREET 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33147** 83 84 City 85 Zip Code 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 Statu 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. SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1.1 TITLE TITLE GONZALEZ, RENE 1.2 NAME NAME 2762 NW 62 ST STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 HTLE TITLE NAME 5.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

skiling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information used roport is true and securate and that my signature shall have the same legal effect as if made under oath; that I am an or typically empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in I hereby certify that the information supplied with this indicated on this annual report or supplemental applied. officer or director of the corporation or the received Block 12 or Block 13 if changed, or on an attacher

SIGNATURE: ...

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