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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000053684

D.O.S. INC.

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90138 018 ***150.00

D.Q.O. 1	110.								
Principal Plac	e of Business	Mailing Address				- I I DARRAN HIN INION RIIGI NOIIS AAIRI DERIK ANIOI I	IIIWW IIRIW WALL	/I 19211 9581 1881	
231 SW 74TH AVENUE 1231 SW 74TH AVENUE									
IAMI FL 33144 MIAMI FL 33144									
						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
					···	07/27/1993			
Principal Place of Business 2a. Mailing Address					4. FEI Number	-	pplied For .		
26		26				65-0431814	Not Applicable		
Suite, Apt. #, etc. Suite		Suite, Apt. #, etc.	uite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	le	City & State				6. Election Campaign Financing	***\$5:00	May Be	•
]		28				Trust Fund Contribution	- Added	to Fees	
Zip	Zip Country Zip			ntry		8. This corporation owes the current year Inta	ingible		
]	25	29	0			Personal Property Tax.	☐Yes	No	
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Registered A	Agent		
				81	Name	i V			
	Holas, Ruben			82	Street Addr	ess (P.O. Box Number is Not Acceptable)			
481	1 S.W. 5 TERRACE			02	Street Addi	ess (F.O. BOX Number is Not Acceptable)			
MIAI	MI FL 33134			83					
								- <u>-</u>	
				84	City	FL	85 Zip	Code	
office or r	egistered agent, or both, in the Stat im familiar with, and accept the oblig Signature, typed or printed name of registered as	e of Florida. Such change was aut gations of, Section 607.0505, Florid	horized la Stati	l by 1 utes.	the corporation	oration submits this statement for the purpose of on's board of directors. I'hereby accept the appoint when reinstating)	itment as re	egistered -	_
2.		AND DIRECTORS	13.	ngoin	t aignature require	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	ORS IN 12	ă
TLE	P	□ DELETE	1.1 TITLE 1.2 NAME				☐ Change	☐ Addition	-
AME	PRIETO, FERNANDO T					•			_
	1231 SW 74 AVENUE				ADDRESS			1	Š
TREET ADDRESS	1				1			-	Š
ITY-\$T-ZIP	MIAMI FL 33144	☐ DELETE	1.4 CITY 2.1 TITLE		-ZIP		Change	Addition	5
ITLE	D NICOLAC BUREN H	EJ occur	2.2 NAME					[
AME	NICOLAS, RUBEN H							ĺ	
TREET ADDRESS	1231 SW 74 AVENUE				ADORESS				
ITY-ST-ZIP	MIAMI FL 33144	□ DELETE	-	TY-S	T-ZIP-			Addition	
ITLE			3.1 TI				Change	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AME							☐ Change		
TREET ADDRESS			3.2 NA	ME			Change		
TY-ST-ZIP			3.2 NA 3.3 ST	ME REET	ADDRESS		Change		
MLE		_	3.2 NA 3.3 ST 3.4. C	ME REET				- Addition	
		☐ DELETE	3.2 NA 3.3 ST 3.4. CI 4.1 TI	NME REET ITY-SI ILE			☐ Change	☐ Addition	
AME		_	3.2 NA 3.3 ST 3.4, CI 4.1 TT 4. 2 N	AME REET ITY-SI ILE AME	T-Z!P			☐ Addition	
AME TREET ADDRESS		_	3.2 NA 3.3 ST 3.4, CI 4.1 TT 4. 2 N	AME REET ITY-SI ILE AME				☐ Addition	
TREET ADDRESS TTY-ST-ZIP		☐ DELETE	3.2 NA 3.3 ST 3.4. CC 4.1 TT 4. 2 N. 4.3 ST 4.4 CC	ME TREET TY-ST TLE AME TREET TY-ST	T-ZIP ADDRESS		Change		
TREET ADDRESS		_	3.2 NA 3.3 ST 3.4. Cf 4.1 TT 4. 2 N. 4.3 ST 4.4 CF	TREET TY-ST TLE TREET TY-ST TLE	T-ZIP ADDRESS				
TREET ADDRESS TTY-ST-ZIP		☐ DELETE	3.2 NA 3.3 ST 3.4. CC 4.1 TT 4. 2 NA 4.3 ST 4.4 CC 5.1 TT 5.2 NA	REET TY-ST TLE TREET TY-ST TLE AME	T-ZIP ADDRESS 1-ZIP		Change		
TREET ADDRESS ITY-ST-ZIP ITLE		☐ DELETE	3.2 N/ 3.3 ST 3.4. CC 4.1 TT 4. 2 N/ 4.3 ST 4.4 CC 5.1 TT 5.2 N/ 5.3 ST	TREET TY-ST TLE TY-ST TLE THE THE TREET TREET	T-ZIP ADDRESS T-ZIP ADDRESS		Change		
TREET ADDRESS ITY-ST-ZIP ITLE IAME		☐ DELETE	3.2 N/4 3.3 ST 3.4. CI 4.1 TI 4. 2 N/4 4.3 ST 4.4 CI 5.1 TI 5.2 N/4 5.3 ST 5.4 CI	REET TY-SI TLE AME TY-SI TLE AME TY-SI TREET TY-SI	T-ZIP ADDRESS T-ZIP ADDRESS		☐ Change	☐ Addition	
TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS		☐ DELETE	3.2 N/ 3.3 ST 3.4. Cr 4.1 TT 4. 2 N/ 4.3 ST 4.4 Cr 5.1 TT 5.2 N/ 5.3 ST 5.4 Cr 6.1 TT	TREET TY-ST TLE AME TY-ST TLE AME TY-ST TLE TY-ST TLE TY-ST TLE TY-ST	T-ZIP ADDRESS T-ZIP ADDRESS		Change	☐ Addition	
TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP		☐ DELETE	3.2 NA 3.3 ST 3.4. CC 4.1 TT 4. 2 N. 4.3 ST 4.4 CC 5.1 TT 5.2 NA 5.3 ST 5.4 CC 6.1 TT 6.2 NA	TREET TY-ST TLE AME TY-ST TLE AME TY-ST TLE TY-ST TLE	T-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP		☐ Change	☐ Addition	
TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP		☐ DELETE	3.2 NA 3.3 ST 3.4 CC 4.1 TT 4. 2 N 4.3 ST 4.4 CC 5.1 TT 5.2 NA 5.3 ST 5.4 CC 6.1 TT 6.2 NA 6.3 ST	TREET TY-ST TLE AME TY-ST TLE AME TY-ST TLE TY-ST TLE	T-ZIP ADDRESS F-ZIP ADDRESS F-ZIP ADDRESS		☐ Change	☐ Addition	

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 arrival 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 true employeed 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.

SIGNATURE: