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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MEN # P9300 S ASSOCIATION CORP.	0054699 (2)			U 874 (B 8874 7874 7871 7871
Principal Place	e of Business	Mailing Address		I INDALORU ELA IDIAN IIINI ABUIT ADILL BOLIN GOLDI ALIN	t albin third toing can indi
13780 SW 56 SUITE 102 MIAMI FL 331 US		13780 SW 56 ST SUITE 102 MIAMI FL 33175 US		DO NOT WRITE IN THIS S 3. Date Incorporated or Qualified 08/04/1993	SPACE
2. Principal Pi	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0428913	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	9	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 3	Country	8. This corporation owes or has paid the cur-	
	9. Name and Address of Currer		*1	10. Name and Address of New Registered	
BRENS, ANGEL P			81 Name		
12710 SW 112TH ST			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33186			83		
			63		
			84 City	FL	85 Zip Code
SIGNATURE	Signature, typed or printed name of registered agr		da Statutes. Registered Agent signature requi	poration submits this statement for the purpose of tion's board of directors. I hereby accept the appoint of the statement for the purpose of tion's board of directors. I hereby accept the appoint of the statement of the purpose of	
TITLE	DPT OFFICERS AN	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
NAME	BRENS, ANGEL P		1.2 NAME		
STREET ADDRESS	12710 SW 112TH ST		1.3 STREET ADDRESS	·	
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY - ST - ZIP		
TITLE	DVS	☐ DELÉTE	2.1 TITLE		☐ Change ☐ Addition
NAME	BRENS, M JACQUELINE		2.2 NAME		
STREET ADDRESS	12710 SW 112TH ST		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL 33186	□ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME			3.2 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		
CFTY - ST - ZIP		☐ DELETE	4.4 CITY-ST-ZIP		Change Addition
TITLE		☐ DELCTE	5.1 TITLE 5.2 NAME	•	Change Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CUTY OF THE			5.3 STREET AUDRESS		

6.4 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filting 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.

305-388-9577

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

TITLE

NAME

STREET ADDRESS

Angel P. Brens

DELETE

FILED

Apr 13 1998 8:00am

Secretary of State

1,20.98

☐ Change

Addition