CORP ANNUA	POFIT ORATION REPORT 998		MAY 1ST IS \$550.00 FLORIDA DEPARTMENT OF STATE Sendra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED May 13 1998 8:00ar Secretary of State	
DOCUM I. Corporation P JUNE GR Principal Place c 6755 SW 75TH A MIAMI FL 33143	OUP, INC,	6755 S	Address W 75TH AVE FL 33143			
. Principal Plac		26	ling Add <b>ress</b> e, Apt <b>#, etc</b> .		DO NOT WRITE IN THIS SF 3. Date Incorporated or Qualified 08/05/1993 4. FEI Number 65-0431869 5. Certificate of Status Desired	Applied For Not Applicable \$8.75 Additional
2 City & State 3 Zip 4	Country 25 9. Name and Address of	28 Zıpı 29	& State	Country 30	6. Election Campaign Financing Trust Fund Contribution     8. This corporation owes or has paid the curre	Yes 🗌 No
6755 ( MIAMI	<b>EZ</b> , JAIME E <b>SW</b> 75TH AVE IFL 33143			83	dress (P.O. Box Number is Not Acceptable)	
office or reg agent. I am 1	the provisions of Sections istered agent, or both, in the familiar with, and accept the	607.0502 and 607.15 he State of Florida. Si he obligations of, Sec	508, Florida Statuti uch change was a stion 607.0505, Flo	84 City es, the above-named co authorized by the corpora orida Statutes.	FL rporation submits this statement for the purpose of c ation's board of directors. I hereby accept the appoi	85         Zip Code           changing its registered         intment as registered
	nature, typed or pretire name of reg	istered agent and litic if appl	cable (NO1	es, the above-named co authorized by the corpor- rida Statutes.	rporation submits this statement for the purpose of c ation's board of directors. I hereby accept the appoi ured when reinstating) DATE	hanging its registered
IGNATURE Sig 2. TLE ME REET ADDRESS	OFFICE OFS SUAREZ, JAIME E 8755 SW 75TH AVE		cable (NO1	es, the above-named co authorized by the corpora- rida Statutes. Registered Agent signature reg 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	rporation submits this statement for the purpose of a ation's board of directors. I hereby accept the appoi	changing its registered
IGNATURE Sig 2. TILE INME IN TY-ST-ZIP TILE INME INME INME INME INME INME INME INM	OFFICE OPS SUAREZ, JAIME E 6755 SW 75TH AVE MIAMI FL VPT SUAREZ, FATIMA 6755 SW 75TH AVE	istered agent and litic if appl	cable (NO1)	es, the above-named co authorized by the corpora- rida Statutes. Registered Agent signature reg 13. 1.1 TIFLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS	rporation submits this statement for the purpose of a ation's board of directors. I hereby accept the appoint ured when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND I	hanging its registered intment as registered
IGNATURE         Sig           2.         Sig           TILE         ME           ME         Sig           REET ADDRESS         I           ITY-ST-ZIP         I           ILE         ME           ME         Sig           IV-ST-ZIP         I           ILE         ME           ME         ME           ME         ME           ME         ME           REET ADDRESS         I	OFFIC OFS SUAREZ, JAIME E 8755 SW 75TH AVE MIAMI FL VPT SUAREZ, FATIMA	istered agent and litic if appl		as, the above-named co authorized by the corpor- rida Statutes. Registered Agent signature req 13. 1.7 TIFLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TIFLE 3.2 NAME 3.3 STREET ADDRESS	rporation submits this statement for the purpose of c ation's board of directors. I hereby accept the appoint ured when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND I	hanging its registered intment as registered DIRECTORS IN 12 Change Addition
IGNATURE         Sig           2.         Sig           TLE         WAE           REET ADDRESS         I           TY-ST-ZIP         TLE           WME         Sig           REET ADDRESS         I           IREET ADDRESS         I           TLE         WME           REET ADDRESS         I           TY-ST-ZIP         TLE           WME         I           REET ADDRESS         I           TY-ST-ZIP         TLE           WME         I           REET ADDRESS         I           REET ADDRESS         I           REET ADDRESS         I	OFFICE OPS SUAREZ, JAIME E 6755 SW 75TH AVE MIAMI FL VPT SUAREZ, FATIMA 6755 SW 75TH AVE	istered agent and litic if appl	Cable (NOT	as, the above-named co tuthorized by the corpor- trida Statutes. Registered Agent signature req <b>13.</b> 1.7 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	rporation submits this statement for the purpose of c ation's board of directors. I hereby accept the appoi ured when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND I	Changing its registered intment as registered DIRECTORS IN 12 Change Addition Change Addition
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