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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 01 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000057036 (4)

OLIVAR & ASSOCIATES, INC.

Principal Place of Business Mailing Address					AL SOLIL GOLDL DILLI LODIS BORDO LIRLO DILL LODI	
3902 W. 12TH AVENUE 3902 W. 12TH AVENUE HIALEAH FL 33012 HIALEAH FL 33012 US US					DO NOT WR	ITE IN THIS SPACE
					3. Date Incorporated or Qualifie	d
6 Odnainal C	Name of Discharge	A. Mailing Address			08/13/1993 4. FEI Number	The second from
	Place of Business	2a. Mailing Address				Applied For
Suite, Apt.	# AIC	Suite, Apt #, etc.			65-0437142	Not Applicable  \$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & Stat	le	City & State			6. Election Campaign Financing	, <u> </u>
<b>23</b>	Country	<b>Z</b> (p)	Coul	atry	Trust Fund Contribution	
24	25	29	30	y	This corporation owes or has     Personal Property Tax due Ju	
24	a. Name and Address of Cur		1301		10. Name and Address of New	
A.O.	CDONALD, STEPHEN J			81 Name	)	, 5 Tc
315 SE 7TH ST					<u> auハハ〇 升・// uM</u> ress (P.O. Box Number is Not Accep	otable)
SUITÉ 303				230		er .
F(	ORT LAUDERDALE FL 33301			83 201	S. Biscarne	Blud.
				84 City MA	iAm	85 Zip Code
11, Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statule	es, the ab	ove-named corp	poration submits this statement for th	e 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. Thereby accept the appointment as registered agent. Lam families with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	Ground VI				4	125198
SIGNATURE	Signature, typed or printed name of registered	Lagent and little if applicable (NOT	t Registered	Agent signature requi	red when reinslating)	DATE
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
TITLE	l vs	☐ DELETE	1.1 111	LE		Change Addition
NAME	OLIVAR, REGINA N.		1.2 NA	ME		
STREET ADDRESS	3190 S.W. 116 AVENUE		1.3 ST	REET ADDRESS	j.	
CITY-ST-ZIP	DAVIE FL 33330		1.4 00	Y-ST-21P		
TITLE	P	☐ DELETE	2.1 30	LE		Change
NAME	OLIVAR, FERNANDO R.		2.2 NA	ME		
STREET ADDRESS	.3190 S.W. 116 AVENUE		2.3 \$1	REET ADDRESS		
CITY-ST-ZIP	DAVIE FL 33330	DELEVE		TY-ST-ZIP		Change Addition
TITLE		L_J DELETE	3.1 TIT			Change Aboltion
NAME			3.2 NA			
STREET ADORESS				REET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CI 4.1 TIT	TY-ST-21P		Change Addition
TITLE			4.1 III			
NAME expert apporce				REET ADDRESS		
STREET ADDRESS				Y-ST-ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TO			Change Addition
NAME		_ section	5.2 NA			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		DELETE	6.1 10			Change Addition
NAME			6.2 NA			<b>2</b>
STREET ADDRESS				REET ADDRESS		
SINCEL MUUTESS	1		0.3 31	HELL POPULOG		

14. 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.