## 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

1, Corporatio	MENT # P93000 N BUSINESS SERVICES GR	0064820 (2) ROUP, INC.			A 8811 81881 1814 1884 884 884 886
Principal Plac	e of Business	Mailing Address			A BITAL BANDI MULAN HINTI ARIN 1881
4326 SW 8 STREET MIAMI FL 33134 US		4326 SW 8 STREET MIAMI FL 33134 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  09/17/1993	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
n		26		65-0436462	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stat	е	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Z <sub>I</sub> p	Country	8. This corporation owes or has paid the	
4	25	29	30	Personal Property Tax due June 30.	Yes No
	g, Name and Address of Currer	11 Registered Agent	81 Name	10. Name and Address of New Registe	red Agent
LAGOS, DOUGLAS H 14445 SW 167 TERRACE MIAMI FL 33177				Address (P.O. Box Number is Not Acceptable)	
			84 City		85 Zip Code
office or ragent Ta SIGNATURE	registered agent, or both, in the State im familiar with, and accept the oblig Stinature, typod or period name of registered age	of Florida, Such change was a lations of, Section 607.0505, Flo	authorized by the corporate Statutes.  OCA (AS H.  Registered Agent signature)  13.	corporation submits this statement for the purpo- poration's board of directors. I hereby accept the  ### 43 required when feinstating)  ADDITIONS/CHANGES TO OFFICERS	appointment as registered
TITLE	PCTD	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	VANONI-LAGOS, ROSSANA 14445 SW 167 TERRACE		1.2 NAME		
STREET ADORESS   CITY-ST-ZIP	MIAMI FL		1.3 STREET ADDRESS 1.4 City-St-Zip		
TILE	174 WWW   16	DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADORESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		T ] DELETE	2 4 CITY - ST - ZIP		Change Addition
itle   Iame		Fig Access	31 TITLE 32 NAME		C CHANGE C AGUNION
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TILE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREFT ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 City-ST-ZiP 5.1 TiTLE		Change Addition
NAME :		L) seeds	5.2 NAME		Li cuendo Li vocación
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-S1-ZIP			5.4 CITY-ST-ZIP		
TITLE	777	DELETE	61 TITLE		Change Addition

CITY - ST- ZIP 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 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

6.2 NAME

6 3 STREET ADDRESS

STREET ADDRESS

305-446-9820

**FILED** 

May 05 1998 8:00am

Secretary of State