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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000065242

## **FILED** Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90087 014 \*\*\*150.00

COPIT	CORP.				1 (88)(88) (18 (8)88 (10) 88)(( 88)() 88)() 88	1 <b>13 3118</b> 1 81113 41811	<b>4</b> (3(4-2)4) (43)
Principal Plac	ce of Business	Mailing Address					
10335 SW 99 ST 10335 SW 99 ST						,	
MIAMI FL 33176 MIAMI FL 33176							
					DO NOT WRITE IN TH	IIS SPACE	
					3. Date Incorporated or Qualifed		
					09/20/1993		
	Place of Business	2a. Mailing Address			4. FEI Number	. Ar	oplied For
21		26			65-0521472	No	ot Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		Additional
22					3. Controlle of Charles Desired	Fee Re	equired
	City & State City & State				6. Election Campaign Financing	\$5.00	May Be
23		28		·	Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes the current year		_ 1
24	25	<del></del>	30	·	Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Currer	nt Registered Agent		81 Name	10. Name and Address of New Registere	d Agent	
ARM	MAS, MARIA			Name			
	35 SW 99 ST				ess (P.O. Box Number is Not Acceptable)		
	MI FL 33176						
MICA	WI 1 E 35170			83			
				84 City	F	85 Zip (	Code
11, Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the at	pove-named corpo	pration submits this statement for the nurnose	of changing its	registered
DITICE OF I	registered agent, or both, in the State arn familiar with, and accept the obliga	of Florida. Such change was au	ithorized	by the corporatio	n's board of directors. I hereby accept the app	ointment as re	gistered
	arriaminar war, and decept the obliga	110/13 Of, Occident Go7.0000, 1 (d).	ida Siait	ites.			J
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE:	Registered	Agent signature required	when reinstating) DATE		
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTO	RS IN 12
TITLE	PVST	☐ DELETE	1.1 TIT	LÉ		Change	☐ Addition
NAME	ARMAS, MARIA		1.2 NA	ME			į
STREET ADDRESS	10335 SW 99 ST		1.3 STI	REET ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CIT	Y-ST-ZIP			
TITLE			_				
NAME		☐ DELETE	2.1 TIT	LE		☐ Change	☐ Addition
STREET ADDRESS		☐ DELETE	2.1 TIT 2.2 NA			☐ Change	Addition
		☐ DELETE	2.2 NA			☐ Change	☐ Addition }
CITY-ST-ZIP		☐ DELETE	2.2 NA 2.3 STT	ME REET ADDRESS		Change	Addition
CITY-ST-ZIP		☐ DELETE	2.2 NA 2.3 STT	ME REET ADDRESS IY-ST-ZIP	!	_	
			2.2 NA 2.3 STT 2. 4 CT	ME REET ADDRESS IY-ST-ZIP LE	1	☐ Change	Addition
TITLE			2.2 NA 2.3 STI 2.4 CII 3.1 TITI 3.2 NA	ME REET ADDRESS IY-ST-ZIP LE ME	1	_	
TITLE NAME STREET ADDRESS			2.2 NA/ 2.3 STT 2.4 CF 3.1 TIT 3.2 NA/ 3.3 STF	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS	<u> </u>	_	
TITLE NAME		☐ DELETE	2.2 NAI 2.3 STI 2.4 CII 3.1 TITI 3.2 NAI 3.3 STF 3.4. CII	ME REET ADDRESS IY-ST-ZIP LE REET ADDRESS IY-ST-ZIP	· · · ·	Change	Addition :
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE			2.2 NAI 2.3 STT 2.4 CFT 3.1 TITT 3.2 NAI 3.3 STF 3.4. CFT 4.1 TITT	ME REET ADDRESS IY-ST-ZIP LE REET ADDRESS IY-ST-ZIP LE		_	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ DELETE	2.2 NAI 2.3 STT 2.4 CT 3.1 TIT 3.2 NAI 3.3 STF 3.4 CT 4.1 TITI 4.2 NA	ME REET ADDRESS IY-ST-ZIP LE REET ADDRESS IY-ST-ZIP LE ME	!	Change	Addition :
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	2.2 NA/ 2.3 STI 2.4 CI 3.1 TITI 3.2 NA/ 3.3 STF 3.4 CII 4.1 TITI 4.2 NA/ 4.3 STF	ME REET ADDRESS IY-ST-ZIP LE REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS	!	Change	Addition :
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME		☐ DELETE	2.2 NA/ 2.3 STI 2.4 CIT 3.1 TITI 3.2 NA/ 3.3 STF 3.4 CIT 4.1 TITI 4.2 NA/ 4.3 STF 4.4 CIT	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP	!	Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE		☐ DELETE	2.2 NA/ 2.3 STI 2.4 CI 3.1 TITI 3.2 NA/ 3.3 STF 3.4 CII 4.1 TITI 4.2 NA/ 4.3 STF	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP	1	Change	Addition :
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELETE	2.2 NA/ 2.3 STI 2.4 CIT 3.1 TITI 3.2 NA/ 3.3 STF 3.4 CIT 4.1 TITI 4.2 NA/ 4.3 STF 4.4 CIT 5.1 TITI 5.2 NA/	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME	1	Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS		☐ DELETE	2.2 NA/ 2.3 STI 2.4 CIT 3.1 TITI 3.2 NA/ 3.3 STF 3.4 CIT 4.2 NA/ 4.3 STF 4.4 CIT 5.1 TITI 5.2 NA/ 5.3 STF	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE AEET ADDRESS AEET ADDRESS AEET ADDRESS	1	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELETE	2.2 NA/ 2.3 STI 2.4 CIT 3.1 TITI 3.2 NA/ 3.3 STF 3.4 CIT 4.2 NA/ 4.3 STF 4.4 CIT 5.1 TITI 5.2 NA/ 5.3 STF	ME REET ADDRESS IY-ST-ZIP LE REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE AE REET ADDRESS Y-ST-ZIP LE AE REET ADDRESS Y-ST-ZIP		Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE		☐ DELETE	2.2 NA/ 2.3 STI 2.4 CIT 3.1 TITI 3.2 NA/ 3.3 STF 3.4 CIT 4.2 NA/ 4.3 STF 4.4 CIT 5.1 TITI 5.2 NA/ 5.3 STF 5.4 CIT	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE AEET ADDRESS Y-ST-ZIP LE AEET ADDRESS Y-ST-ZIP LE AEET ADDRESS Y-ST-ZIP LE		Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ DELETE	2.2 NA/ 2.3 STI 2.4 CIT 3.1 TITI 3.2 NA/ 3.3 STF 4.1 TITI 4.2 NA/ 4.3 STF 4.4 CIT 5.1 TITI 5.2 NA/ 5.3 STF 5.4 CIT 6.1 TITI 6.2 NA/	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE AEET ADDRESS Y-ST-ZIP LE AEET ADDRESS Y-ST-ZIP LE AEET ADDRESS Y-ST-ZIP LE	1	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 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, with all other like empowered.

SIGNATURE:

MANGED NOTHED REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR