## 7-10-98 B 4445-C 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

## DOCUMENT # P93000070543 (2)

## **HUMBERTO MARTINEZ CORPORATION**

## FILED Apr 10 1998 8:00am Secretary of State

		WITH 162 0011 011						
Principal Place of Business			Ma	Mailing Address				1 seessan un seine inst antic mut abite abite sein sein sein alle seint mit be filt best
5851 DAPHNE DR W PALM BCH. FL 33415 US			٧	S851 DAPHNE DR W PALM BCH. FL 33415 US				DO NOT WRITE IN THIS SPACE
i os			U	3				3. Date Incorporated or Qualified
								10/04/1993
2. Principal P	Place of Busi	ness	28.	Mailing Address				4. FEI Number Applied For
21			26					65-0435083 Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22			27					Fee Required
City & State				City & State				6. Election Campaign Financing \$5.00 May Be
<b>23</b> Zip		Country	28	7	1 0.			Trust Fund Contribution Added to Fees
24	Country Zip		Zψ	Country			8. This corporation owes or has paid the current year Intangible	
24	25 9. Name and Address of Curren		29			L		Personal Property Tax due June 30. Yes No  10, Name and Address of New Registered Agent
644			in thousa	lored Agent		81	Name	10. Name and Address of New Negistered Agent
	ARTINEZ, H						140/110	
5851 DAPHNE DR W PALM BCH. FL 33415				82 Stree			Street Add	dress (P.O. Box Number is Not Acceptable)
						83		
						84	City	85 Zip Code
dd Durawant	to the seculo		06 - 170	07.4500 EU-UU 0		Ш	<u> </u>	FL W 127
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the 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. I hereby accept the appointment as registered								
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature Ivoer	dor printed name of registered eg	ugud And Idle	if applicable (MOI)	F: Register	od Ana	ent aional es roc	Ured when reinstating) DATE
12.		OFFICERS AN			13.	ou Aye	an espirature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	*		DELETE	1.1 7	ITLE		Change Addition
NAME	MARTIN	IEZ, HUMBERTO			1.21	IAME		
STREET ADDRESS	5851 D/	APHNE DR			1.3 5	STREET	ADDRESS	
CITY-ST-ZIP	W PALA	A BCH. FL			1.4 0	HY-S	T-ZIP	
TITLE				DELETE	2.1 T		. <u>-</u>	☐ Change ☐ Addition
NAME					2.2 N	IAME		•
STREET ADDRESS					2.3 9	TAEET	ADDRESS	
CITY-ST-ZIP					2.4	CITY-S	ST-ZIP	e
TITLE				DELETE	3.1 T	TLE		☐ Change ☐ Addition
NAME					3.2 N	IAME		İ
STREET ADDRESS					3.3 \$	TREET	ADDRESS	
CITY-ST-ZIP					3.4. (	CITY-S	II- ZIP	
TITLE				☐ DELETE	4.1 T	ITLE		Change Addition
NAME					4.21	NAME		
STREET ADDRESS					4.3 S	TREET.	ADDRESS	
CITY-ST-ZIP	ļ				4.4.0	ITY-S1	T-ZIP	
TITLE				☐ DELETE	5.1 T	ITLE		☐ Change ☐ Addition
NAME					5.2 N	IAME		
STREET ADDRESS					5.3 S	TAEET	ADDRESS	
CITY-ST-ZIP					5.4 C	ITY-SI	T-ZIP	
TITLE				☐ DELETE	6.1 T	ITLE		Change Addition
NAME					6.2 N	AME	-	
STREET ADDRESS					6.3 S	TREET	ADDRES\$	
CITY-ST-ZIP					540	ITV . ST	T_ 710	

14. Thereby 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.

SIGNATURE

Unberto Wastring

4-4-98

2F034 (10/97)