## 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** 

## DOCUMENT # P93000071375 (8)

MIAMI'S MONEY, INC.

Principal Place of Business Mailing Address 1620 WEST FLAGLER STREET 1620 WEST FLAGLER STREET MIAMI FL 33135 MIAMI FL 33135 DO NOT WRITE IN THIS SPACE HS 3. Date Incorporated or Qualified 10/12/1993 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0442284 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 24 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 RIVERON, ROMELIO 1620 W. FLAGLER ST. Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33135 83 Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change NAME PEREZ, JORGE E 1.2 NAME STREET ADDRESS 8251 N.W. 8TH ST. ##418 1.3 STREET ADDRESS MIAMI FL 33126 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition RIVERON, ROMELIO NAME 2.2 NAME 1620 W. FLAGLER ST. STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE Addition 3.1 TITLE Change 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE TITLE 4.1 TITLE Change Addition NAME

6.4 CITY-ST-ZIP 14. I hereby certify that the Information supplied with this filling 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.

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIF

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

WOLFE PROMELIO RIVERON

DELETE

DELETE

1/15/97

2655415131

Change

Change

\_\_ Addition

Addition

**FILED** 

Jan 26 1998 8:00am

Secretary of State