## 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 # P93000078259 (7)

## **FILED** May 18 1998 8:00am Secretary of State

WEST	BENDLE SUBDIVISION, I	NC.				
Principal Place	e of Business	Mailing Address			I IBANIBAN NIN LONDO NINN ARNIN BANIN BANIN ARNIN	1000  1011 <b>  </b> 1106  <b> </b>   1116  1214  100
8298 N.W. 2 MIAMI FL 3		8298 N.W. 21 ST. MIAMI FL 33122				
MINIMAL VE S	V-EE	MINH I E OUIEE	WITHIN PL OUIEE		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Quatified	
					11/12/1993	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21 Suite Ant # ata		Cuito Ant H etc		65-045 1880	Not Applicable	
Suite, Apt. #, etc		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Floation Compalan Financina		
23		28		6. Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Zip Country		B. This corporation owes or has paid the c	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre				10. Name and Address of New Registere	d Agent
Н	UDSON, ROBERT F JR.		€	1 Name		
70	01 BRICKELL AVE.		8	2 Street Ac	ddress (P.O. Box Number is Not Acceptable)	
SUITE 1600						
M	IIAMI FL 33131		3	3)		
			6	4 City	F	85 Zip Code
11 Pursuant	to the provisions of Sections 607.05	02 and 607 1508 Horida S	Statutes the abo	vo-named ci		
office or r	egi <b>ste</b> red agent, or both, in the Stat	te o' Florida. Such change v	was authorized	by the corpo	orporation submits this statement for the purpose ration's board of directors. I hereby accept the a	ppointment as registered
	m tamiliar with, and accept the obli	gations of, Section 607.050	5, 1 lorida Statul	.08		
SIGNATURE	Signature typed or printed name of regericited in	green and title if applicable	(NOTE: Registered A	igent signature re	quired when reinstaling) DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	☐ DELETE	1 1 111()			☐ Change ☐ Addition ♀
NAME	RODRIGUEZ, RITA		1.2 NAM	ŧ [		[5
STREET ADDRESS	8298 N.W. 21ST ST.		1.3 STRE	ET ADDRESS		[
CHTY-ST-ZIP	MIAMI FL 33122			- S1 - ZIP		
TITLE		DELETE	L ·	t		☐ Change ☐ Addition C
NAME			2 2 NAM	E		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		D DELETT		'-ST-ZIP		[
TITLE		☐ DELETE		·		Change Addition
NAME			3.2 NAM	i		Ì
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		DELETE		- ST - ZIP		Change Addition
TITLE		L_ DECEM				Charige Addition
NAME			4. 2 NAN	1		
STREET ADDRESS			<b>1</b>	ET ADDRESS		}
CITY-ST-ZIP TITLE		DELETE		- ST - ZIF'		Change Addition
NAME		ביי מבנבונ	5.1 HILE 5.2 NAM			
STREET ADDRESS				ET ADORESS		
CITY-ST-ZIP			5.4 CITY			
TITLE		DELETE				☐ Change ☐ Addition
NAME			62 NAM	į.		
STREET ADDRESS			1	ET ADDRESS		Ì
CITY-ST-ZIP		~ 1	6.4 C(TY			
	erlify that the information supplied	with the filing does not qua			in Section 119.07(3)(i), Florida Statutes. I further	certify that the information

up and report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an or trustoe empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in mell with an address. indicated on this an mal report or dipplemental andual officer or director of the composition or the receipt or to Block 12 or Block 13 if changed, or the algorithment of the composition of the receipt of the Block 12 or Block 13 if changed, or the property of the Block 12 or Block 13 if changed, or the state of the Block 12 or Block 13 if changed, or the state of the Block 12 or Block 13 if changed, or the state of the Block 13 if changed in the Block 13 if the Block 14 if