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

PROFIT CORPORATION ANNUAL REPORT.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

FILED

Jun 02 1998 8:00am

ANNUAL REPORT, 1998		Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Secretary of State
DOCU 1. Corporatio	n Namo	01151 (7)		
	RAYMONDO INVEST	MENTS, INC.		*
Principal Plac	e of Business	Mailing Address		
	W 16th Terrace FL 33145	c/o LIANA MA 910 Collins	Ave. #L	DO NOT WRITE IN THIS SPACE
		Miami Beach,	FL 33139	3. Date Incorporated or Qualified 01/06/94
, ·	Place of Business	2a. Mailing Address		4. FEI Number Applied For
Suite, Apt.	#. etc	26 Suite, Apt. #, etc.	<u></u>	65-0460475 Not Applicab 5 Captificate of Status Posited Status Po
22		27		5. Certificate of Status Desired Fee Required
City & Stat	е	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	28	Country	Trust Fund Contribution Added to Fees 6. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. 🔼 Yes 🗌 No
	g. Name and Address of Curren	nt Registered Agent	B1 Name	10. Name and Address of New Registered Agent
	. Mandana - Dan		Name	
Liana Martinez, Esq. LIANA MARTINEZ, P.A.			82 Street Add	ress (P.O. Box Number is Not Acceptable)
	Collins Ave.		83	
Miami	Beach, FL 33139	ı	84 City	■■ 85 Zip Code
44 Divisiont	to the executations of Continue CO7 Of O	O and CO7 1500 Florida Cash to	the above period com	
agent la	registered agent, or beth, in the State arm familiar with, and accept the obligations.	of Florida, Such change was a ations of, Section 607,0505, Flo	uthorized by the corpora rida Statutes.	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature typed or printed name of registered age	ent and title it applicable (NDTE	· Registered Agent signature requi	red when reinstating) DATE
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME	PDT	DELETE	1.1 TITLE 1.2 NAME	Change Additio
STREET ADDRESS	Elizabeth Y. Ra		1.3 STREET ADDRESS	
CITY-ST-ZIP	2267 SW 16th Te Miami, FL 33145	rrace	1.4 CITY - S1 - ZIP	$\frac{100002550911}{06/08/98-01041-038}$
TITLE	VPDS	DELETE	2.1 TITLE	***150。00
NAME	Constancia Vald	es	2.2 NAME	
STREET ADDRESS CITY-ST-ZIP	2267 SW 16th Te	rrace	2 3 STREET ADDRESS 2. 4 City - S1 - 7ip	
TITLE	Miami, FL 33145	DELFTE	3.1 TITLE	☐ Change ☐ Additio
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP	☐ Change ☐ Additio
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETÉ	5.1 TITLE	L Change Additio
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CMY-ST-ZIP	
TITLE		DELET E	6.1 THILE	Change Additio
NAME			6.2 NAME	V 1.
STREET ADDRESS			6.3 STREET ADDRESS	7/9
CITY ST. 7IP			64 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 suppliemental 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address