## 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

POCUMENT # P9400003755 (3)

FILED Apr 24 1998 8:00am Secretary of State

ELENA VAN KAMPEN INC.							
							(A) (A) (A) (A)
Principal Plac	ce of Business	Mailing Address					
-16000 CW 87TH AVE							
1800 Red Road 770150					DO NOT WRITE IN	THIS SPACE	
Lultane R					3. Date Incorporated or Qualified	THO BI FICE	
miami, F1, 33143   miami, P1,				57	01/14/1994		i
2. Principal i	cipal Place of Business 2a. Mailing Address			<u> </u>	4. FEI Number	Ar	oplied For
21					65-0471474	<u> </u>	ot Applicable
_	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional
22					or obtained or otates besited	Fee Re	equired
City & Sta			State		6. Election Campaign Financing	\$5.00	
Zip	Country Zip Co		Country		Trust Fund Contribution L	J Added t	
24	25 29 30			<b>,</b>	This corporation owes or has paid the Personal Property Tax due June 30.		tangible No
	9. Name and Address of Current Registered Agent				10. Name and Address of New Registr		- 140
VAN KAMPEN, ELENA V							
16920 SW 87TH AVE				Ctroot An	Ideas (D.O. Barrish and Alas Assessable)		
MIAMI FL 33157			82	Street Au	Idress (P.O. Box Number is Not Acceptable)		i
			83				
ļ			84	City			0.4
				]			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.							
agent. I a	am familiar with, and accept the obliga	tions of Section 607.0505, Florid	da Statutes	s.	ration's board of directors. I hereby accept tric	appointment as	registered
SIGNATURE							
12.	Signature, typod or printed name of registered agen		legistered Age	ont signature req	quired when reinstating) D. ADDITIONS/CHANGES TO OFFICERS	ATE	f
TITLE			1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS	Change	Addition S
NAME	VAN KAMPEN ELENA		1.2 NAME			Onlinge	
STREET ADDRESS	10000 CW OTTH AVE 7701 SW 180 Terr.		1.3 STREET	ADDRESS.			[8
CITY-ST-ZIP	MIANUEL ANGET		1.4 CITY-S				
TITLE			2.1 TITLE			Change	Addition C
NAME	VAN KAMPEN, ELENA		2.2 NAME				
STREET ADDRESS	TRANSPORTER TO THE TOTAL CONTRACTOR		2.3 STREET	ADORESS	•		
CITY-ST-ZIP	ZIP MIAMI FL 33157 2			ST-ZIP			
TITLE	DELETE 3.1 T		3.1 TITLE			☐ Change	Addition
NAME	321		3.2 NAME				
STREET ADDRESS	3.3		3.3 STREET	ADDRESS			
CITY-ST-ZIP			34. CITY-S	ST-ZIP			
TITLE			4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME				
STREET ADORESS	i i i i i i i i i i i i i i i i i i i		4.3 STREET				
CITY-ST-ZIP TITLE			4.4 CITY - ST 5.1 TITLE	T- ZIP		Change	Addition
NAME			5.2 NAME				LI AUDIROII
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST				
TITLE			6.1 TITLE	1 - ZIF		Change	Addition
NAME			6.2 NAME	ŀ			
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP	6.40		6.4 CITY-ST	1-21P			
	certify that the information supplied will	h this filing does not qualify for the			in Section 119.07(3)(i), Florida Statutes, I furth	er certify that the	information

4. 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 trustoe empowers 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 attaction with an address

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