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 # P94000013041 (6)

FILED Jan 20 1998 8:00am Secretary of State

ANTIQUES BY REBECA, INC.				
Principal Place of Business	Mailing Address		- 4 00011001 410 10414 41041 4014 0414 0414 06141 06161 1140	/B 11(14 0041) 0700} FABS FOOT
5792-94 BIRD ROAD	5792-94 BIRD ROAD			
MIAMI FL 33155	MIAMI FL 33155		DO NOT WRITE IN THIS	SPACE
			3. Date Incorporated or Qualified	UI NOL
			02/14/1994	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0482547	Not Applicable
Suite, Apt. #, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	27			Fee Required
	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip Country	7ip	Country	Trust Fund Contribution B. This corporation owes or has paid the cut	Added to Fees
24 25	29	30	Personal Property Tax due June 30.	Yes No
9. Name and Address of Currer			10. Name and Address of New Registered	
VIEGO, REBECA		81 Name		7
5792-94 BIRD ROAD		82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33155		oli oli oli oli oli oli	reas (1.0. Box Hamber is the Receptable)	
		83		
		84 City		85 Zip Code
		'	FL	.
Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig SIGNATURE Signature, typed or provided name of registered agent.	ant and the Rapplicable (NOTE fingistored Agent signature requ	incd when reinstating) DATE	·
12. OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND	
TILE D	☐ DELETE	1.1 TITLE		Change Addition
NAME VIEGO, REBECA		1.2 NAME		
STREET ADDRESS 5792-94 BIRD ROAD CITY-ST-ZIP MIAMI FL 33155		1.3 STREET ADDRESS		
THILE D	DELETE	1.4 CHY-SI-ZIP 2.1 THUE		Change Addition
NAME VIEGO, RAFAEL	Dreen	2.2 NAME		
STREET ADDRESS 5792-94 BIRD ROAD		2.3 STREET ADDRESS		
City-St-ZIP MIAMI FL 33155		2. 4 GITY - ST - ZIP		
TITLE	DILFTE	3.1 TITLE		Change Addition
NAME		3.2 NAME		-
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY+ST+ZIP		
TITLE	DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY - S1 - ZIP		4.4 CITY+S1-ZIP		
TITLE	DELETÉ	5.1 TOLE		Change Addition
NAME		5.2 NAME		ſ
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY - ST - ZIP		
TITLE	☐ DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-S1-ZIP	_	6.4 CITY - ST - ZIP		}

indicated on this annual roport or supplemental annual teport is the application of the corporation of the corporation or the receiver or trusted employered to execute this apport 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.