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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

NAME Street adoress P94000016168 (4)

	ER & RIDER, INC.	010100 (4)						
Principal Plac	e of Business	Mailing Address				I IRBUIDOL AID EDITI DIBLE OBILI ODUL BELLI OBIDA DIBLE	#11#1 11#1# B	
TODDLER RIS		P.O. BOX 924087						
24018-SW-17 HOMESTEAD		TODDLER & RIDER HOMESTEAD FL 33031				DO NOT WRITE IN THIS SPACE		
US	FE 33170	US				3. Date Incorporated or Qualified	AUL	
						02/28/1994		
2. Principal P	lace of Business	2a. Mailing Address			, 	4. FEI Number	1 1	Applied For
211 245	00 SID 197 Ave	26				65-0474094		lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	T	Additionat
22		27				J. Commodic of Claud District	Fee F	Required
City & State	A-OTEAN EI	City & State				6. Election Campaign Financing		May Be
23 HON	NESTEND, FL Country					Trust Fund Contribution		
Zip 330:	31 25 ()()	7 ₁ p	30	пиу	,	8. This corporation owes or has paid the curre Personal Property Tax due June 30.		ntangible No
Z4]	9. Name and Address of Current		30			10. Name and Address of New Registered A		
10	NDONO, MICHELE C			81	Name			··· ·
	15 S.W. 144TH ST.							
	AMI FL 33176			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
17117	WIII 1 E 00 1 1 0			83				
							,	
				84	City	FL	85 Zip	Code
office or r agent. Ea SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligations for profits agent to be stated agent to be				the corporation	oration submits this statement for the purpose of con's board of directors. I hereby accept the appo	ntment a	s registered
12.	OFFICERS AND		13.	- 0		ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTO	RS IN 12
TITLE	DPST	DELETE	1.1 T	TLE			Change	☐ Addition
NAME	LONDONO, MICHELE C		1.2 N	AME		4		ŀ
STREET ADDRESS	8745 S.W. 144TH ST.		1.3 S	TREE T	ADDRESS 2	4500 SW 19M AUR		
CITY-ST-ZIP	MIAMI FL 33176		1.4 C	TY-S	T-ZIP 4	HOMESTEAD, FL 330:	31	
TITLE	V	DELETE	2111	TLE			Change	☐ Addition
NAME	LONDONO, CARLOS H		22 N	AME			•	ļ
STREET ADDRESS	8745 S.W. 144TH ST.		2.3 \$	REET	ADDRESS 3	14500 SW 197 AUC Homestead FL 3303	_	
CITY-ST-ZIP	MIAMI FL 33176		2.40	ITY - 5	ST-ZIP	Jomestead FL 3303	<u> </u>	
TITLE		DELETE	3.1 TI	RLE		•	Change	Addition
NAME			3.2 N					
STREET ADDRESS			3.3 S	REET	ADDRESS			Į
CITY-ST-ZIP		TI Serese			ST - Z#P		-	
TITLE		DELETE	4.1 11			· L	Change	☐ Addition i
NAME			4. 2 N					ŀ
STREET ADDRESS	ı				ADDRESS			
CITY-ST-ZIP	***	DELETE			T-ZIP	<u> </u>	Chaper	Additor
TITLE		L.J DEUETE	5.1 TI			L	Change	Addition
NAME			5.2 N		I Drosen			[
STREET ADDRESS			1		ADDRESS			Ì
CITY-ST-ZIP TITLE		DELETE	5.4 CI 6.1 TI		T-ZIP		Change	Addition
11166		the process	■ U.1 ft					- 100/1001

14. Thereby 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 13 if changed to the analysis and 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.

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(305/242-05/5

FILED

May 15 1998 8:00am

Secretary of State