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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 28 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000016633 (7)

SOURCE UNLIMITED INCORPORATED										
1							ere i 11 11 e 1111 e 1			
		 								
Principal Place of Business Mailing Addre							8141	*******		
375 N.W. 86	тн ст.	11055 NW 59 TERR								
# 8 # 55 MIAMI FL 33126 MIAMI FL 33178						DO NOT WRITE IN	THIS SPACE	:		
MIMMI FE 33	1120	US				3. Date Incorporated or Qualified				٦
						03/02/1994				1
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number		qA	plied For	1
21		26			65-0470721	ţ	No	Applicable	爿	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.	.75 A	dditional	7	
22		27			or Certificate of Status Desired	<u> </u>	ee Re	quired	╝	
City & Stat	te	City & State			6. Election Campaign Financing			Мау Ве	ĺ	
23		Zip Country				Trust Fund Contribution			Fees	_
Zip	Country	Zip	⊢ 	ry		8. This corporation owes or has paid to				ļ
24	9. Name and Address of Curren	29	<u></u>			Personal Property Tax due June 30. Yes W//o 10. Name and Address of New Registered Agent				
		t Hogisteree Agent	8	1 N	ame	To, Haine and Address of New Hegist	erea Agent			┨
	ERNANDEZ, EDUARDO									╛
	11 BRICKELL KEY DRIVE		8	2 St	reet Addre	ss (P.O. Box Number is Not Acceptable)				
-	JITE 400		8	3						4
MI	IAMI FL 33131		L							
			8	1 -	•		FL [85]	Zip C		- [
11. Pursuant	to the provisions of Sections 607,050	2 and 607.1508, Florida Statut	es, the abo	ve-na	med corpo	ration submits this statement for the purp	ose of chang	jing its	registered	7
agent, 1 a	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was a ations of, Section 607.0505, Flo	iuthorized rida Statut	by the es.	corporation	ration submits this statement for the purp in's board of directors. I hereby accept th	e appointme	ent as	registered	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable (NOT	F Registered A	gent sig	native requirer	when reinstating)	DATE			
12.		OFFICERS AND DIRECTORS 13.		go. (0)2	, natoro toquiret	ADDITIONS/CHANGES TO OFFICER		CTOR	S IN 12	15
TITLE	V	DELETE	1.1 TITLE				Ct	ange	Addition	75
NAME	SALADIN, ALBERT M		1.2 NAM	Ε						13
STREET ADDRESS	375 N.W. 86TH CT., # 8		1.3 STRE	ET ADDI	RESS					[8
CITY - ST-ZIP	MIAMI FL 33126		1.4 CITY	1.4 CITY - ST - ZIP						18
TITLE	P	DELETE	2.1 TITLE				Ch	ange	Addition	٦٥
NAME	CASTILLO, FRANCISCO J		2.2 NAM	E	(ĺ
STREET ADDRESS	375 N.W. 86TH CT., # 8		2.3 STRE	ET ADDI	RESS					ļ
CITY-ST-ZIP	MIAMI FL 33126		2. 4 CITY	- ST- ZI	P					_
TITLE	D	☐ DELETE	3.1 TITLE	i	j	•	☐ Ch	ange	Addition Addition	1
NAME	SALADIN, VILMA I		3.2 NAM	E	}					
STREET ADORESS	375 N.W. 86TH CT. #8		3.3 STRE	ET ADDI	RESS					1
CITY-ST-ZIP	MIAMI FL 33126		3.4, CITY		P					_
TITLE	ST	DELETE	4.1 TITLE		1		L Ch	ange	Addition	1
NAME	CASTILLO, ELIZABETH		4. 2 NAM	E	1					
STREET ADDRESS	375 N.W. 86TH CT., # 8		4.3 STRE	ET ADDI	ress					1
CITY - ST - ZIP	MIAMI_FL 33126		4.4 CITY		<u>`</u> _ _		- <u> </u>		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	_
TITLE	<u> </u>	L] DELETE	5.1 TITLE		ļ		[] Ct	lange	Addition	
NAME			5.2 NAM	E	j					
STREET ADDRESS			5.3 STRE		l					
CITY-ST-ZIP	<u> </u>		5.4 CiTY		<u>, </u>				F 4 2 1111	4
TITLE	1	DELETE	6.3 TITLE		1		☐ Ch	ange	Addition	
NAME			6.2 NAM	Ŀ	J					J
CTDCCT ADDDCCC	1		6 2 0700							ı.

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 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 12 or Block 13 if changed, or on an attachright with an address.