Feb 24, 1999 8:00 am

Secretary of State

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

**PROFIT** CORPORATION ~ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000019892

	n Name					
CONFOR	RTEC D.M.E., INC.					
				I HARMAN HAR HANN ARRIVA AND HANN ARRIVA	1810) Páiste Haiá 1811 (611)	1888 HAN 1881
Principal Place	e of Business	Mailing Address			OBING ODIES NAME (DIES COMO)	
6741 SW 24 ST		6741 SW 24 STREET				
SUITE 43	NEET	SUITE 43				
MIAMI FL 33155	5	MAIM! FL 33155			E IN THIS SPACE	
US		US		3. Date Incorporated or Qualifed		ĺ
			· ·	03/15/1994	<del></del>	
2. Principal Pl	face of Business	2a. Mailing Address	· 1 -	4. FEI Number	<del> </del>	olied For
21 54	<del></del>		57 AUG	<u>65-0474989</u>		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A	
22		27				·
City & State	<b>.</b>	City & State	£/	6. Election Campaign Financing	\$5.00° Added t	•
23 MiC	ene per	Zip Zip	Country	Trust Fund Contribution		o rees
Zip 33 /	Country		30 //.	This corporation owes the currer     Personal Property Tax.		□No
24 33 10	9. Name and Address of Curren		30 45.	10. Name and Address of New Re		
	9. Name and Address of Curren	it Kedistelen Adelit	81 Name	TO. Name and Fladicus of New 132	giotaroa regam	
MEN	IDEZ, EDUARDO S					
	SW 24 STREET			ress (P.O. Box Number is Not Acceptab	le)	
SUIT			83 542	LNW 57 AVE.		
	AI FL 33155		*3			
7774			84 City , ,	•	85 Zip C	126.
		00 1 00 FL 11 01 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	·		
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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 attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS