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 #

P94000031449 (9)

NANATON, INC.

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

Principal Place of Business	Mailing Address		
89690SW 137 AVE MIAMI FL 33183 US	8669 SW 137 AVE MIAMI FL 33183 US		
2. Principal Place of Business	2a. Mailing Address		

26

28

29

Country

9. Name and Address of Current Registered Agent

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DE LA OSSA, LUCELLY **8669 SW 137 AVE**

Suite, Apt. #, etc.

City & State

Zip

FILED Mar 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ Yes

Not Applicable

3. Date Incorporated or Qualified

04/24/1994 4. FEI Number

65-0484998

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

8669 SW 137 AVE MIAMI FL 33183			82	82 Street Address (P.O. Box Number is Not Acceptable)			
Mir	WII FL 33183		83				
			84	0.0	Total 7: Code		
			04	City	FL 85 Zip 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.							
SIGNATURE Signature typod or printed name of registered a peri and left if applicable [NOTE Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND DIRECTORS	me (NOTE H	13.	mi signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	DELETE	1.9 TITLE		Change Addition		
NAME	HERRERA, EDUARDO A	1	1.2 NAME				
STREET ADDRESS	8669 SW 137 AVE		1.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-S	T-ZIP			
TITLE	D	☐ DEL€ TE	2.1 TITLE		Change Addition		
NAME	HERRERA, EDUARDO A.		2.2 NAME				
STREET ADDRESS	8669 SW 137 AVE		2.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL		2 4 CITY-5	ST-ZIP			
TITLE		DELETÉ	31 TITLE		· Change Addition		
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY - S	ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition		
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition		
NAME			5.2 NAME				
STREET ADDRESS			5,3 STREET	address			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DEFELE	6.1 TITLE		Change Addition		
NAME			6.2 NAME				
STREET ADDRESS		į	63 STREET	ADDRESS			
CITY-SI-ZIP			6.4 CITY-S				
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 trustoe 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 attachnion with an address. SIGNATURE:							

Country

R1 Name

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