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FILED
Mar 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000036716 (6)

1. Corporation Name
WEEWO PEEPO CORPORATION

Principal Place of Business

5600 SOUTHWEST 135 AVENUE
SUITE 113 & 115
MIAMI FL 33184

Mailing Address

5600 SOUTHWEST 135 AVENUE
SUITE 113 & 115
MIAMI FL 33184



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/16/1994

4. FEI Number

65-0490677

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

Yes No

2. Principal Place of Business

21 14280 SW 39 ST.

Suite, Apt. #, etc.

22 City & State

23 MIAMI, FL

24 Zip

33175

25 Country

(U.S.A.)

2a. Mailing Address

26 c/o FELISA SANCHEZ

Suite, Apt. #, etc.

27 City & State

14280 SW 39 ST.

28 City & State

MIAMI, FL

29 Zip

33175

30 Country

(U.S.A.)

9. Name and Address of Current Registered Agent

SANCHEZ, ROBERT
5600 S.W. 135TH AVENUE
STE. 113 & 115
MIAMI FL 33184

10. Name and Address of New Registered Agent

81 Name

ROBERT SANCHEZ

82 Street Address (P.O. Box Number is Not Acceptable)

14280 SW 39 ST

83

84 City

MIAMI

FL

85 Zip Code

33175

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

(24 Feb 98)

12. OFFICERS AND DIRECTORS

TITLE P
NAME SANCHEZ, FELISA
STREET ADDRESS 5600 SOUTHWEST 135 AVENUE, SUITE 113 & 115
CITY-ST-ZIP MIAMI FL 33184

TITLE VP
NAME SANCHEZ, ROBERT
STREET ADDRESS 5600 S.W. 135TH AVE., STE. 113 & 115
CITY-ST-ZIP MIAMI FL

TITLE S
NAME SANCHEZ, MANUELA
STREET ADDRESS 5600 S.W. 135TH AVE., STES. 113 & 115
CITY-ST-ZIP MIAMI FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME SANCHEZ, FELISA
1.3 STREET ADDRESS 14280 SW 39 ST
1.4 CITY-ST-ZIP MIAMI, FL 33175

2.1 TITLE VP
2.2 NAME SANCHEZ, ROBERT
2.3 STREET ADDRESS 14280 SW 39 ST
2.4 CITY-ST-ZIP MIAMI, FL 33175

3.1 TITLE S
3.2 NAME SANCHEZ, MANUELA
3.3 STREET ADDRESS 14280 SW 39 ST
3.4 CITY-ST-ZIP MIAMI, FL 33175

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE: Felisa Sanchez President 24 Feb 98 (305) 225-7351

CR2E034 (10/97)