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

PROFIT CORPORATION ANNUAL REPORT 1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P94000037739 (7)

OCHOA ENTERDRISES INC

FILED Mar 19 1998 8:00am Secretary of State

OCHOR ENTENENISES, 1140;					
Principal Place of Business	Mailing Address			- Î JARITÎNDI HA KANÎN RIDÎN ADÎNÎ DANÎN QUÎN DEKADÎ Î	INSV NABIT KREAA INTA NATI TAAN
S323 FORZLEY AVE S323 FORZLEY AVE ORLANDO FL 32812 ORLANDO FL 32812				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified 05/16/1994	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21	26			59-3073510	Not Applicable
Suite, Apt. #, etc.	*************************************		·		\$8.75 Additional
22	27			5. Certificate of Status Desired	Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution	Added to Fees
Zip Country	Zip Country			8. This corporation owes or has pald the cu	
24 25	[29]	30			Yes No
g, Name and Address of Current	Hegistered Agent	8	1 Name	10. Name and Address of New Registered	Agent
OCHOA, JOSE L		ľ	Name		
5323 FORZLEY AVE		8	2 Street Addr	ess (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32812		8			· · · · · · · · · · · · · · · · · · ·
		"	1		
		8	4 City	FL	85 Zip Code
44 Pursuant to the provisions of Sections 607 0503	and 607 1508. Florida Statul	toe the abo	ve-named corn		of changing its registered
 Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State agent. I am familiar with, and accept the obliga 	of Florida. Such change was	authorized l	by the corporati	on's board of directors. I hereby accept the ap	pointment as registered
	tions of, Section 607.0505, FI	orida Statuti	9 \$.		
SIGNATURE Signature, typed or printed narrai of registered again	(NO)	F: Benislered A	gent signature require	ed when reinstating) DATE	
12. OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE POST	DELETE	1.1 TITLE			Change Addition
NAME OCHOA, JOSE L		1.2 NAMI			
STREET ADDRESS 5323 FORZLEY AVE		1.3 STRE	ET ADDRESS		li
CITY-ST-ZIP ORLANDO FL 32812		1.4 CITY	-ST-ZIP		
TITLE	☐ DELETE 2.1				Change Addition
NAME	2.2		:		
STREET ADDRESS		2.3 STRE	ET ADDRESS		
CITY-ST-ZIP		2. 4 CITY	- ST - ZIP		
TITLE	☐ DELETE 3:				☐ Change ☐ Addition
NAME		3.2 NAMI	<u> </u>		
STREET ADDRESS		3.3 STRE	et address		
CFTY-ST-ZIP			-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME		4. 2 NAM			
STREET ADDRESS		4.3 STRE	ET ADDRESS		
CITY-ST-ZIP	Populate	4.4 City			Change Addition
TITLE	DELETE	51 TITLE	l		Change Addition
NAME		5.2 NAMI	I		
STREET ADDRESS			ET ADDRESS		
CITY-ST-ZIP	DELETE	5.4 City			☐ Change ☐ Addition
THUE	☐ PECCUE	6.1 TITLE	ł t		L CHANGE L MUNICIT
NAME OTOTAL LODGE		6.2 NAMI			
STREET ADDRESS			ET ADDRESS		
CITY-ST-ZIP	th this filing does not qualify f	6.4 CITY	ntion stated in	Section 119.07(3)(i), Florida Statutes. I further of	ertify 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 trusted 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 attraction with an aptress.