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 # P94000038904

1. Corporation						
RRTR	uçking investment co	RP.				
					# 1 40 11001 110 10111 01011 01011 06111 08111 06	88 (148 6) (8148 (814) 814) (816) (816)
	•					
Principal Place of Business Mailing Address					1 3 BAISEAN FIN 16101 NIGH NG211 46111 (BAIS)	E.Q. 15101 (0150 16511 08111 0181 1001
333 WEST 34TH ST. 333 WEST 34TH ST.						
HIALEAH FL 33012 HIALEAH FL 33012						•
					DO NOT WRITE IN TH	S SPACE
					3. Date Incorporated or Qualifed	
					05/24/1994	· · · · · · · · · · · · · · · · · · ·
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For	
1 26				65-0497728	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional
2 27		·		5. Certificate of Status Desired	Fee Required	
City & State City & State		City & State	•		6. Election Campaign Financing	\$5.00 May Be
23 28					Trust Fund Contribution	Added to Fees
Zip	p Country Zip		Country		8. This corporation owes the current year I	
24	25 29		30		Personal Property Tax.	☐ Yes 🗷 No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registere	d Agent
		34 3 F. W.	8	1 Name		
	RAHAM, ROLANDO	0.5	8	2 Stroot Add	roce (D.O. Box Number is Not Assessable)	
333 WEST 34TH ST.			°	2 Street Add	treet Address (P.O. Box Number is Not Acceptable)	
HIALEAH FL 33012			8	3	AND LONG THE RESERVE OF THE PARTY OF THE PAR	1947年,1957年
; 2			L			this is to a distriction
			8	4 City		85 Zip Code
44° Dureuget	t to the provisions of Sections 607.0	502 and 607 1508 Elopida Statute	e the abo	vo named corr	possion submits this statement for the number of	st changing its registered
office or	registered agent, or both, in the Sta am familiar with, and accept the obli	te of Florida. Such change was au	thorized b	y the corporation	poration submits this statement for the purpose on so board of directors. I hereby accept the app	ointment as registered
- ,		gations of, Obcitor our tooo, thor	ida Olalute			
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable. (NOTE:	Registered Ag	ent signature require	ed when reinstating) DATE	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD DELETE		1.1 TITLE		w ·	☐ Change ☐ Addition
NAME	ABRAHAM, ROLANDO 1.		1.2 NAME	.		
STREET ADDRESS	CONTRACT CATILOT		1.3 STREET ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33012		1.4 CITY-ST-ZIP			
TITLE	STD	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
	ABRAHAM, RAYSA		4	1		☐ onlinge ☐ Addison
NAME			2.2 NAME	ľ		
STREET ADDRESS	•			ET ADDRESS		
CITY-ST-ZIP	HIALEAH FL 33012		2. 4 CITY-			
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NAME			3.2 NAME	:	•	
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NAME	1 - ,		4. 2 NAME	: İ	•	
STREET ADDRESS				ET ADDRESS	,	,
CITY-ST-ZIP		, ,	4.4 CITY-			
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME .			5.2 NAME			
]	* * * * * * * * * * * * * * * * * * *		ET ADDRESS		
STREET ADDRESS	[55]		5.4 CITY-			}
CITY-ST-ZIP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		6.1 TITLE			Change D Addition
TITLE	हेल केंद्र से हुए। विशेष		6.2 NAME	1		☐ Change ☐ Addition
NAME }-	AME SHATE PRODUCTION OF THE PR					•
STREET ADDRESS	1 25 5		6.3 STREE	ET ADDRESS		Į

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.

SIGNATURE:

CITY-ST-ZIP -

FILED

Feb 01, 1999 8:00am

Secretary of State

02-01-1999 90010 047 ***150.00