Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90245 044 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secre ary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400038916

1. Corporation Name

NAME

STREET ADDRESS

CITY-ST-ZIP

J.G. CAF	rpenter, cof	IP.															
Principal Place	e of Business		M	ailing Address			_		\dashv	11		I DIDII DDIII	TALEL OFFICE			HOLE BULL 1	/
12247 S.W. 17T				247 S.W. 17TH LA	NF												
#105-S				#106-S													
MIAMI FL 33175				MIAMI FL 33175						DO NOT WRITE IN THIS SPACE							
									3.		ncorporated	or Qualife	,d				
											1/1994						
2. Principal P	lace of Business		2a.	Mailing Address	s				4.	FEI N					Ap	plied For	
21			26							<u>65-0</u>	<u> 196117 </u>				No	Applica	ble
Suite, Apt.	#, etc.		27	Suite, Apt. #, et	tc.				5.	Certifo	ate of Status	s Desired		\$	8.75 A Fee Re	dditional	ı
City & Sitat	e			City & State					6.	Electic	n Campaigr	Financin	g 🖂		\$5.00	Vlay Be)
23			28							Trust I	und Contrib	oution			Added t	o Fees_	
Zip	Co	untry	1	Zip		Country	/		8.	This c	orporation o	wes the ci	urrent yea	ır Intangil	ble	,	
24	25			2930						Personal Property Tax.				Yes Yo			
	9. Name and Ad	idress of Curren	Regis	tered Agent					10.	Name	and Addre	ss of Nev	/ Registe	red Age	nt		
						81		Name									1
	RRA, JOSE C					82	+	Street Ad	dress (F	O. Box	: Number is	Not Acce	ptable)				
	17 S.W. 17TH LAN	IE .				"		01.00(7.17	d.000 (.	.0. 20,			,,	_			
#105						83	1						-				
MAIM	AI FL 33175					\ <u></u>	1	-									
						84	1	City						$FL^{S^{s}}$	3 Zip (Code	İ
office or 6	to the provisions of egistered agent, or to me familiar with, and Signature, typed or printed	octh, in the State o accept the obligat	of Florid ons of	da. Such change , Section 607.050	was au 05, Flori	thorized by	' t/ s.	he corpora	tion's b	oard of	directors. I r	nereby acc	cept the a	.ppointme	int as re	çistered 	
12.	Signature, typed or primed	OFFICERS AN		_		13.)NS/CHAN	GES TO C	OFFICERS	S AND D	IRECTO	RS IN 12	2
TITLE	PSD			DEL	ETE	11TITLE	_								Change	Ado	
NAME	GUERRA, JOSE	C				1.2 NAME											ı
STREET ADDRESS	40047 OW ATTURANT					1.3 STREET		ADDRESS									
	MIAMI FL 33175						:ITY-\$T-ZIP										
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NAME	1					AVE LALKA		1									

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

6.4 CITY-ST-ZIP

SIGNATURE: 🐼

TUSE & GUERRA DY-211-99