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 # P94000043374 (5)

FILED May 11 1998 8:00am Secretary of State

1. Corporation ABBEY	ROADS A.C.L.F. INC.	30040074 (0)				
Principal Plac	e of Business	Mailing Address				304 man min lank diàl (68)
2942 SW 4TH AVENUE 6776 SW 64 ST					[
MIAMI FL 331	129	MIAMI FL 33143			DO MOT MIDITE IN THE	
		U\$			DO NOT WRITE IN THIS	SPACE
					3. Date Incorporated or Qualified 06/06/1994	
2. Principal P	Place of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·		4. FEI Number	Applied For
21 26		}1	-		65-0492925	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
27					5. Certificate of Status Desired	Fee Required
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00 May Bo
Zip Country		28			Trust Fund Contribution	Added to Fees
24	}		<u> </u>	Country 8. This corporation owes or has paid the current year Intaggible		
44	9, Name and Address of Curr	29 29 Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
MA	RVEZ, CHARLOTTE		81	Name	io, ionicia iogistoria	- Agont
	76 SW 64 ST.		00	Charact Andal	(D.O. D. M.)	
	AMI FL 33143		62	Street Add	ress (P.O. Box Number is Not Acceptable)	
			83			
			84	City		85 Zip Code
L					FI	_
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obt	502 and 607.1508, Florida Statuti ite of Florida Such change was a igations of, Section 607.0505, Flo	es, the above authorized by orida Statutes	e-named corp y the corpora s.	ocration submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing its registered pointment as registered
SIGNATURE	Signature, typed or printed name of registered a	provide and talk if anylogish (000)	C. Doniel and Ana		red whon reinstating) DATE	
12.		IND DIRECTORS	13.	ant signature redui	red when reinetating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	<u> </u>	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	RAMOS, JUAN C		1.2 NAME			
STREET ADDRESS	67 76 SW 64 ST.		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP			
TITLE	VP .	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	MARVER, CHARLOTTE		2.2 NAME			
STREET ADDRESS			2.3 STREE1 ADDRESS			
CITY-ST-ZIP			2. 4 CITY - \$1 - ZIP			
TITLE		DELETÉ	3.1 TITLE			Change Addition
NAME Street address			3.2 NAME	ADDRESS		
			3.3 STREET	- 1		
CITY-ST-ZIP TITLE			3.4. CITY-S 4.1 TITLE	SI - ZIP		Change Addition
NAME			4. 2 NAME			Li change Li Addition
STREET ADORESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE.	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS	T ADDRESS		5.3 STREET	ADDRESS		
CITY-ST-ZIP	-		5.4 CITY - ST	- 1		
TITLE			6.1 TITLE			Change Addition
NAME			6.2 NAME	Ì		2
STREET ADDRESS			63 STREFT	ADDRESS		
CITY-ST-ZIP			6.4 City-St	T-ZIP		

14. Thereby 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 good 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 convention 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 chants (), or on an attachment with an address.