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 #

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

P94000044899 (0)

DFI SERVICES, INC.

FILED
May 05 1998 8:00am
Secretary of State

Addition

Addition

200						
Principal Place of Business Mailing Address					I DE EBITO TOTIO TOTI JUNI	
9370 SW 72 A 200 MIAMI FL 33 US		9370 SW 72ST A 200 MIAMI FL 33173 US		DO NOT WRITE IN THIS SPA 3. Date Incorporated or Qualified 06/15/1994	CE	
2. Principal Place of Business 2s		2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0497596	Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			8.75 Additional Fee Required	
City & State City & State 23 28		City & State		B. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Ζφ	Country	8. This corporation owes or has paid the current	year Inlangible	
24	25		30	Personal Property Tax due June 30.	· · · · · · · · · · · · · · · · · · ·	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
PU	ig, aleu l		81 Name			
9370 SW 72 ST, A 200			82 Street Add	ess (P.O. Box Number is Not Acceptable)		
# 8235				**************************************		
MIAMI FL 33173			83			
			84 City	rt i	5 Zip Code	
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 fapiliar with, and accept the confidence of Florida Statutes.						
SIGNATURE	allele 20	ing Alelih		vired when reinstating) DATE		
12.	Signature, typed or printed name of registered as	VD DIRECTORS	E: Registered Agent signature requ	ADDITIONS/CHANGES TO OFFICERS AND DI	PECTORS IN 12	
TITLE	PDT	DELETE	1.1 TITLE		Change	
NAME	PUIG, ALELI L		1.2 NAME	_		
STREET ADDRESS	9370 SW 72 ST, A 200		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP			
TITLE	VPSD	DELETE	2.1 TITLE		Change	
NAME	PUIG, RODOLFO		2.2 NAME		1	
STREET ADDRESS	9370 SW 72 ST A200		2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP			
TITLE	DVP	☐ DELETE	3.1 TITLE	*1.	Change Addition	
NAME	₹ PARDO, ALELI P 3.2 NA		3.2 NAME			
STREET ADDRESS	9370 SW 72 ST A200		3.3 STREET ADDRESS		j	
CITY-ST-ZIP	MIAMI FL		3.4. CITY - ST - ZIP			
T.T. C		DELETE	A A TITLE		Change Addition	

14. 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 eath; 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 chapted, or on an attachment with an address.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

51 TITLE

52 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE Cledi & Qui (Ale): L. PUIC (305) 279-7272