Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90081 046 \*\*\*150.00

## 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 # P94000050989

1. Corporation Name

FEBO GF	ROUP, INC.							
5 to the 1 Steer	- f D i	Mailing Address				_\	AND BAND BOND IOLU A	10110 1011 1001
12360 SW 132 COURT 12360 SW 132 COURT SUITE 109								
MIAMI FL 33186 MIAMI FL 33186						DO NOT WRITE IN TH	IS SPACE	
US US						3. Date Incorporated or Qualifed		
						07/11/1994	·	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	<u> </u>	plied For
21		26				65-0504430		t Applicable
Suite, Apt. 1	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	<b>\$8.75</b> A Fee Rec	
City & State	)	City & State	ity & State			6. Election Campaign Financing	\$5.00	
23		28			Trust Fund Contribution	Added to	o Fees	
Zip	Country	Ζiρ	Coun	try		8. This corporation owes the current year		
24	25	29	30			Personal Property Tax.		□No
	g. Name and Address of Curren	t Registered Agent		81 Na		10. Name and Address of New Register	ed Agent	
FEDA	IANDEZ, JORGE A		l'	o i ina	ne			
10876 SW 151ST PL				B2 Str	et Addre	Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33196			-	B3				
www	11 12 00 100			53				
				B4 Cit			-L 85 Zip C	
11. Pursuant to office or reagent. I ar	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obliga	2 and 607.1508, Florida Statut of Florida. Such change was a tions of, Section 607.0505, Flo	es, the ab uthorized rida Statu	ove-nar by the d es.	ied corpo orporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	) of changing its pointment as reg	registered gistered
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re				gent signa	beriuper enui	d when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	
TITLE	Р	☐ DELETE 1.1		E		RESIDENT	Change	☐ Addition
NAME			1.2 NA	1.2 NAME		LBA S. FERNANDEZ	•	ì
STREET ADDRESS			1.3 STF			0876 SW IST PLACE	20	
CITY-ST-ZIP	MIAMI FL 33196		_	r-ST-ZIP	<i>In</i>	iAM, FLORIDA 3319		Addition
TITLE	S	☐ DELETE	2.1 TITI		\ \	قُلُّ مَا يُسَمِّ حَسَم	Change	Addition
NAME:			2.2 NA					
STREET ADDRESS	10876 SW 151ST PLACE			EET ADOF		<b>0</b>		
*CITY-ST-ZIP	MIAMI FL	- December		Y+ST-ZIP	<del>-   \</del>	THE POESTINENT	Change	Addition
TITLE	FEDNIANDEZ JODOS A	☐ DELETE	3.1 TITI 3.2 NAJ			TE PRESIDENT TERMANDER, JORGE 0876 SCO IST PLACE migan, FL. 33196	A	
NAME	FERNANDEZ, JORGE A					ABOUT CUT IT PLACE	•	
STREET ADDRESS	10876 SW 151ST PLACE		4	EET ADDF		n: nan: 8 33/06		
CITY-ST-ZIP	MIAMI FL ·	DELETE	3.4, CIT 4,1 TITI	Y-ST-ZIP		114"11 1 - 33.46	[ ] Change	Addition
TITLE	FERNANDEZ, ELBA	(€) DCLETE						
NAME	10876 SW 151ST PL		4.2 NA			-		
STREET ADDRESS	MIAMI FL 33196			EET ADDF				ļ
CITY-ST-ZIP	MINAMI LE 22 190	DELETE	4.4 CIT	r-ST-ZIP	+		Change	Addition
TITLE		C) DELETE	5.2 NA				go	
NAME				REET AODF	FSS			
STREET ADDRESS				Y-ST-ZIP				ŀ
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TIT		_		Change	Addition
MAME			6.2 NA					_

led with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information neglital 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 effective ror trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the information supplindicated on this annual report or supple officer or director of the corporation of the Block 12 or Block 13 if changed, or of the

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP