## 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 #** P94000057655 (0)

Country

9. Name and Address of Current Registered Agent

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ROHAIDY, JESUS N 13126 S.W. 2ND TERRACE

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City & State

ncipal Place of Business	Mailing Address 13126 S.W. 2ND TERRACE MIAMI FL 33184		
13126 S.W. 2ND TERRACE MIAMI FL 33184			
Principal Place of Business	2a. Mailing Address		
	— ·		
1	26		

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City & State

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**FILED** Jan 23 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified

8. This corporation owes or has paid the current year Intangible

Applied For

Fee Required

\$5.00 May Be

Added to Fees

☐ No

Not Applicable \$8.75 Additional

08/04/1994 4. FEI Number

65-0510255

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

Street Address (P.O. Box Number is Not Acceptable)

MIAMI FL 33184									
			83					]	
			84	City		85 Zig	p Code	-	
~			[		FL_			_	
office or r	to the provisions of Sections 607.0502 and 607.1503 egistered agent, or both, in the State of Florida. Suom familiar with, and accept the obligations of, Section	ch chango was auth	orized by	v the cor	d corporation submits this statement for the purpose of or reporation's board of directors. I hereby accept the appo	changing intment a	its registered is registered		
SIGNATURE   Signature, typod or printed name of registrated agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	ORS IN 12	16	
TITLE	PD	DELETE	1.1 HTLE			Change	Addition	ĵ	
NAME	ROHAIDY, MARIA		1.2 NAME					2	
STREET ADDRESS	13126 SW 2ND TERRACE		1.3 STREET	ADDRESS				3	
CITY-ST-ZIP	MIAMI FL		1.4 CITY - 9	ST-ZIP				18	
TITLE		DELE1E	21 TITLE			Change	Addition	<b>∫</b> č	
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREET	ADDRESS					
CITY-ST-ZIP			2. 4 CITY-	S7 - ZIP					
TITLE		DELETE	3.1 TITLE			Change	☐ Addition	1	
NAME			3.2 NAME		1			1	
STREET ADDRESS			3.3 STREET	ADDRESS					
CITY-ST-ZIP			3.4 CITY-	ST-ZIP					
TITLE		DELETÉ	4.1 TITLE			Change	Addition	]	
NAME			4. 2 NAME		ļ				
STREET ADDRESS			4.3 STREET	ADDRESS					
CITY-ST-ZIP			4.4 CITY - S	T-ZIP					
TITLE		DELETE	5.1 TITLE			Change	Addition	]	
NAME			5.2 NAME		1			1	
STREET ADDRESS			5.9 STREET	ADDRESS	(			Į.	
CITY-ST-ZIP			5.4 CITY - S	T- 2IP				J	
TITLE		☐ DELETE	6.1 TITLE		[	Change	Addition	1	
NAME			6.2 NAME					l	
STREET ADDRESS			63 STREET	ADDRESS					
CITY-ST-ZIP			6.4 CITY-S						
indicated officer or	on this annual report or supplemental annual report	is true and accura- empowered to exe-	te and thi	at my sic	ed in Section 119.07(3)(i), Florida Statutes. I further cert gnature shall have the same legal effect as if made unde s required by Chapter 607, Florida Statutes; and that my	er oath: ti	hat I am an		

Country

Name

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