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

PROFIT CORPORATION **ANNUAL REPORT** 1998



Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

FILED Mar 19 1998 8:00am Secretary of State

DOCUI	MENT #	P940	000588	327 (4)					
i	E CORP.			• • •					į
Principal Place of Business Mailing Address							T SOURCE THE COURT OF STATE OF	INI NINUS PARAN IASIN KUNI	i (64) iodi
13250 SW 102 ST 13250 SW 102 ST							1		•
				IIAMI FL 33186			DO NOT WRITE IN	TUIC CDACE	
							3. Date Incorporated or Qualified	THIS SPACE	
· 							08/08/1994	•	1
2. Principal Place of Business 2a, Mailing Address							4. FEI Number	I IAn	plied For
21			26	26			65-0534322		t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.								60 7E	
22		27				5. Certificate of Status Desired	Fee Re	ouired	
City & State				City & State			6. Election Campaign Financing	\$5.00	
23				Zip Country			Trust Fund Contribution		
Zip	Country		├ ─, '	<u>}, ' </u>			8. This corporation owes or has paid the		anofole No
24	9. Name and Address of Current Registered Agent						Personal Property Tax due June 30. 10. Name and Address of New Regist		Ø NO
No.			TOTAL TROUBLES	Agent	81	Name	10. Numb and Addison of the Program	orea Agent	
	POSZGAY, GE								
2950 SW 27 AVE					82	Street Add	fress (P.O. Box Number is Not Acceptable)		-
#210 Miam) FL 33133					83				
WHA.	WII FL 33 133						·		
					84	City		FL 85 Zip C	Code
11. Pursuant	to the provisions	of Sections 607	.0502 and 607.15	08, Florida Statu	tes, the above	-named cor	poration submits this statement for the purp		s registered
office or re	egistered agent m familiar with.	, or both, in the S and accept the o	itate of Florida. Si bligations of, Sec	uch change was tion 607.0505. Fi	authorized by lorida Statutes	the corpore	poration submits this statement for the purp tion's board of directors. I hereby accept th	e appointment as	registered
SIGNATURE									
	Signature, typed or p		d agent and title if appli			nt signature requ		DATE	
12.		OFFICERS	AND DIRECTOR		13.		ADDITIONS/CHANGES TO OFFICER		
TITLE	D	051 4140		☐ DELETE 1.		- 1		☐ Change	Addition
NAME				1.2 NAME					
STREET ADDRESS 13250 SW 102 ST City-St-Zip MIAMI FL 33186				1.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	MINIMITES	3100		DELETE	1.4 CITY-S 2.1 TITLE	I - ZIP		Change	Addition
NAME	•			tal become	2.2 NAME				
STREET ADDRESS					2.3 STREET	ADDRESS			
CITY-ST-ZIP					2.4 CITY-5				
TITLE				DELETE	3.1 TITLE			☐ Change	Addition
NAME					3.2 NAME			-	
STREET ADDRESS					3.3 STREET	ADDRESS)
CITY-\$1-ZIP					3.4. CITY-9	T-ZIP			
TITLE				DELETE	4.1 TITLE			Change	Addition
NAME					4. 2 NAME	Į			(
STREET ADDRESS					4.3 STREET	ADDRESS			
CITY-ST-ZIP					4.4 CITY-S	r-ZIP		····	
TITLE				DELETE	5.1 TATLE			☐ Change	☐ Addition
NAME					5.2 NAME	Į			Ì
STREET ADDRESS					5.3 STREET]
CITY-ST-ZIP				DELETE	5.4 CITY-S	T-ZIP		Change	Addition
TITLE				T DETEIR	6.1 TITLE			TT CHANGE	ריי אינוטווטאי
NAME					6.2 NAME	ADDOCCO			
STREET ADDRESS	, 				6.3 STREET	1			1
CITY-ST-ZIP	certify that the in	lormation principal	nd with his fiting o	does not qualify (6.4 CITY-S		Section 119 07/3\(\)(i) Florida Statutes I furti	her certify that the	information

Indicated on this annual report or supplemental annual report of duality to the exemption stated in section 119.07(3)), Florida Statules. Turner certify that it am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

DIRECTOR