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 #

P94000065880 (4)

DEALTECA INC.

FILED Apr 07 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					riserial in land and and and	******	*****	# 111 # 2 111 1 # 2 1
4810 NW 7TH ST 4810 NW 7TH ST								
MIAMI FL 3	3126	MIAMI FL 33126	MIAMI FL 33126		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified			
i					09/08/1994			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Ap	plied For
21		[26]		65-0519261		No	t Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75		
22		[27]				Fee Re	<u> </u>	
City & State		City & State		6. Election Campaign Financing		\$5.00		
Zip Country				.	Trust Fund Contribution		Added t	
24 25		}n ' h	29 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes \square No			
2.71	9. Name and Address of Curre				10. Name and Address of New Ro			
	LONSO, ANTONIO		81	Name				
9351 SW 22ND TER			82	Street Addr	ess (P.O. Box Number is Not Accepta	hla)		· · · · · · · · · · · · · · · · · · ·
	IIAMI FL 33165		02	Direct Hour	das (F.O. Dox Humber is Not Necepta	010)		
			83					
			84	City			85 Zip (Code
				•				
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above	 named corporat 	poration submits this statement for the ion's board of directors. I hereby acce	purpose of ch	nanging its	s registered registered
agent la	im familiar with, and accept the oblig	gations of, Section 607.0505, Flo	rida Statutes.		ising pour of a roots, the only door	pr the appear		
SIGNATURE								
12.	Signature, typed or printed name of registers Lig. CIFFLOR DS: A6	yent and tife if applicable (NOTE ND DIRECTORS	Hegistered Ager	nt signature requir	ed when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND D	IBECTOR	S IN 12
TITLE	I D	DELETE	11 TITLE	I	ADDITIONO/OFFANGED TO OFF		Change	Addition
NAME	ALONSO, ANTONIO		1.2 NAME			_	0	
STREET ADDRESS	9351 SW 22ND TER		1.3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33165		14 CITY-ST					
TITLE	D	DELETE	21 TITLE			L	Change	Addition
NAME	CASANOVA, JOSE	SANOVA, JOSE 22		İ		. 17		
STREET ADDRESS	14101 SW 44TH ST		2 3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33175		2 4 CITY-ST-ZIP					, , , , , , , , , , , , , , , , , , ,
TITLE		☐ DELETE	3 1 TITLE			L	Change	Addition
NAME			3 2 NAME					
STREET ADDRESS			33 STREET	- 1				
CiTY-ST-ZiP		Therete	3 4. CITY - S	T - ZiP		-	T Channe	Addition
TITLE		☐ DELETE	4 1 TITLE			L.] Change	Addition
NAME			4 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS 4.4 CHY-ST-ZIP					
CITY-ST-ZIP TITLE		DELETE	51 TITLE	- cir		Г	Change	Addition
NAME	.		5 2 NAME			_		
STREET ADDRESS			53 STREET	ADDRESS				
CITY-ST-ZIP			54 City-St					
TITLE		DELETE	61 TITLE			Г	Change	☐ Addition
NAME			62 NAME					
STREET ADDRESS			63 STREET A	ADDRESS				
1			1					

14. Thereby certify that the information supplied with this thrig 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 supplicmental 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 ecceivers in the eccei

SIGNATURE:

4/2/98

305-443-14/2