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 #

P94000068735 (7)

DOMARC, CORP.

Mar 19 1998 8:00am									
Secretary of State									

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									(8) (1) (8) (8) (1) (8)
Principal Place of Business Mailing Address				· · · · · · · · · · · · · · · · · · ·		i foolioon ille reakt ordin i	YARR BONI ABIII BERR		SEL CITTURE
1401 WEST 29TH STREET 140			401 WEST 29TH STREET			1			
# C-63		# C-63	# C-63			DO NOT WRITE IN THIS SPACE			
HIALEAH FL 33012 HIALEAH FL 33012					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
							Angui 190		-
2. Principal P	lace of Business	2a. Mailing	Address			09/19/1994 4. FEI Number		IAF	plied For
21		26				65-0520693			t Applicable
Suite, Apt.	#, etc.		pt. #, etc.			7	esired	\$8.75	
22		27				5. Certificate of Status De	sired L	Fee Re	quired
City & State	е	City & S	tato			6. Election Campaign Fir		\$5.00	May Be
23		28				Trust Fund Contributio	<u>, </u>	Added	lo Fees
^{Zip}	Country	Zip	L.	Country	'	8. This corporation owes	•		
24	[25]	29		ю.		Personal Property Tax] No
	9. Name and Address of Currer	it Registered Ag	ent	81	Name	10. Name and Address of	I New Hegistere	d Agent	
	OMINGUEZ, PEDRO A			"					
1401 WEST 29TH STREET				82	Street A	ddress (P.O. Box Number is Not	Acceptable)]
# C-63				83					
HIALEAH FL 33012									
	•			84	City		F	85 Zip (Code
11 Pursuant	to the provisions of Sections 607.050	2 and 607 1508.	Florida Statutes	the above	l e-named c	orporation submits this statemer			s registered
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State on familiar with, and accept the oblig	of Florida Such	change was au	thorized by	the corpo	ration's board of directors. I her	aby accept the e	ppointment as	registered
	in ramitar with, and accept the oblig	ations of, Section	607.0303, PIQII	ida Statutei	5 .				ľ
SIGNATURE	Signature, typed or pointed name of registered ag-	ent and title it applicable	(NOTE:	Registered Apr	eni signature re	quired when reinstating)	DATE		
12.	OFFICERS AN	D DIRECTORS		13.		ADDITIONS/CHANGES	TO OFFICERS A	ND DIRECTOR	S IN 12
TITLE	DP		DELFTE	1.1 TITLE				☐ Change	☐ Addition
NAME	DOMINQUEZ, PEDRO A			1.2 NAME	1				
STREET ADDRESS	1401 WEST 29 ST., C-63			1.3 STREET	ADDRESS				J
CITY-ST-ZIP	HIALEAH FL 33012			1.4 CITY-5	T-ZIP				
TITLE	D	L	DELETE	2.1 TITLE	ŀ			☐ Change	☐ Addition
NAME	ARCE, EDUARDO D	_		2.2 NAME	- 1				
STREET ADDRESS	1401 WEST 29TH ST. , C. N	O. 50		2.3 STREET	ADDRESS]
CITY-ST-2IP	HIALEAH FL 33012			2. 4 CITY-	ST-ZIP			F3.64	
TITLE "	DT	L	DELETE	3.1 TITLE	l			Change	Addition
NAME !	DOMINGUEZ, PATRICIA			3.2 NAME					
STREET ADDRESS	1401 WEST 29TH ST. , C-63	}		3.3 STREET	1				į.
CITY-ST-ZIP	HIALEAH FL 33012		DOLOTE	3.4. CITY-	ST-ZIP			Channe	Addition
TITLE		ι	DELETE	4.1 TITLE	1			Change	المسافوم س
NAME				4. 2 NAME					ŀ
STREET ADDRESS				4.3 STREET					
CITY-SI-ZIP			DELETE	4.4 CiTY-5 5.1 TITLE	ST-ZIP			Change	Addition
TITLE NAME		`	PLECIE	5.2 NAME					, NO.1011
STREET ADORESS				5.3 STREET	ADDOFEE				[
CITY-ST-ZIP				5.4 CITY-S	· ·				
TITLE			DELETE	6.1 TITLE	21-KF			Change	Addition
NAME		•		62 NAME					
STREET ADDRESS				6.3 STREET	ADDRESS				1
CITY-ST-7IP				6.4 CITY-5					

14. I 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 argual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

3-10-98 (305)819-7460