FILED

Jun 09, 1999 8:00 am Secretary of State

06-09-1999 90006 029 ***550.00

Mailing Address 000 OL OT

PROFIT CORPORATION ANNUAL REPORT 1999

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000074309 1. Corporation Name

CORA'S MANAGEMENT SERVICES, INC.

220 31 51			0 31 91							
B-1 MIAMI BEACH FL 33140			B-1 Miami Beach FL 33140				DO NOT WRITE IN TH	IS SPACE		
							3. Date Incorporated or Qualifed			
							10/06/1994			
2. Principal P	lace of Business	2a.	Mailing Address				4. FEI Number		Applied For	
21	add or pagnings	26	manning reaction				65-0550002		Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.								\$8.75 Additional		
22 27							5. Certificate of Status Desired		Required	
City & State City & State							6. Election Campaign Financing	\$5.0	\$5.00 May Be	
23		28					Trust Fund Contribution	Adde	d to Fees	
Zip	Country		Zip	Co	untry		8. This corporation owes the current year	Intangible		
24	25	29		30			Personal Property Tax.	Yes	□No	
	9. Name and Address of Currer	t Regis	tered Agent				10. Name and Address of New Registers	d Agent		
					81	Name				
CORDERO, HILTON					82	Street Add	Address (P.O. Box Number is Not Acceptable)			
220 31 ST					02	Street Add	uress (1.0. dox realiber is not Acceptable)			
B-1					83	3				
MIAMI BEACH FL 33140					L.	000	City 85 Zip Code			
					84	City	F	L 85 Z	ib coos	
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florions of	da. Such change was , Section 607.0505, F	authorize Iorida Sta	ed by tutes	the corporati	tion's board of directors. I hereby accept the app	oontment as	registered	
	Signature, typed or printed name of registered ager		<u>-</u>			nt signature require	red when reinstating) DATE			
12.	OFFICERS AN	D DIRE		13			ADDITIONS/CHANGES TO OFFICERS			
TITLE	PS		☐ DELETE	1.11	TITLE			Chan	ge 🔲 Additio	
NAME	CORDERO, HILTON			1.21	MAME					
STREET ADDRESS	220 31 ST			1.3 9	STREET	ADDRESS				
CITY-ST-ZIP	MIAMI BEACH FL 33140			1.4 (CITY-S	T-ZIP				
TILLE	VPT		☐ DELETE	2.1	TITLE			Chan	ge Addition	
NAME	CORDERO, CORALIA			2.21	NAME					
STREET ADDRESS	220 31 ST			2.3 5	STREE	TADDRESS				
CITY-ST-ZIP	MIAMI BEACH FL 33140			2. 4	CITY-S	ST-ZIP			<u> </u>	
TITLE			☐ DELETE	3.1	TITLE			☐ Chanç	je 🗌 Additio	
NAME				3.21	NAME					
STREET ADDRESS				3.3 5	STREET	TADDRESS				
CITY-ST-ZIP				3.4.	CITY-S	ST-ZIP				
TITLE			☐ DELETE	4.1	TITLE			Chang	ge Additio	

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 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 officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter or or an attachment with an appropriate of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607 or an attachment with an appropriate of the corporation or the receiver or trustee empowered.

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

☐ Change

☐ Change

☐ Addition

Addition