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PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000074646 (8)

TARABES RROTHERS, INC.

FILED Apr 27 1998 8:00am Secretary of State

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Principal Place	e of Business	Mailing Address				. 88111 86111 16611	i Biğiğ Billi Bi	46.6 6.11 (6.6)
13603 SW 26TH ST 13603 SW 26TH ST MIAMI FL 33175 MIAMI FL 33175					1			
					DO NOT WR	ITE IN THIS S	PACE	
					3. Date incorporated or Qualifie	d		
					10/10/1994			
	lace of Business	2a. Mailing Address			4. FEI Number		1 	oplied For
Suite, Apt.	# atc	Suite, Apt. #, etc.			65-0529075			ot Applicable
22	w, 610.	27			5. Certificate of Status Desired			Additional equired
City & State	8	City & State			6. Election Campaign Financing	 		May Be
23		28			Trust Fund Contribution			to Fees
Zip	Country	Zip	Country	=	8. This corporation owes or has			
24	25	29	30		Personal Property Tax due Ju			No
	9. Name and Address of Curr	ent Registered Agent	81	Mama	10. Name and Address of New	Hegistered A	gent	
	SANTOS, NANCY TABARES		*1	Name				
5898 S.W. 25TH STREET			82	Street Addr	ress (P.O. Box Number is Not Accep	table)		
MI	AMI FL 33175		83					
			84	City		FL	85 Zip	Code
44 Diseases	to the provisions of Sections 607.05	02 and 607 1608 Florida Statul	es the above	nemed com	poration submite this statement for the		changino i	te registered
office or re	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was a ligations of, Section 607,0505. Fl	orida Statutes	ine corporat	,,			
SIGNATURE	to the provisions of Sections 607.05 egistered agent, or both, in the Stam tamiliar with, and accept the obli- Signature, typed or printed name of registered a	igent and little if applicable (NOT	E: Registered Age		red when reinstating)	DATE		
SIGNATURE	Signature, typed or printed name of registered a OFFICERS A	igent and little if applicable (NOT ND DIRECTORS	E: Registered Age			DATE FICERS AND	DIRECTOR	RS IN 12
SIGNATURE 12.	Signature, typed or printed name of registered a OFFICERS A	igent and little if applicable (NOT	13.		red when reinstating)	DATE FICERS AND		
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered a OFFICERS A P TABARES, FRANCISCO	igent and little if applicable (NOT ND DIRECTORS	13. 1.1 TITLE 1.2 NAME	nt signature requir	red when reinstating)	DATE FICERS AND	DIRECTOR	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	Bigneture, typed or printed name of registered a OFFICERS A P TABARES, FRANCISCO 9137 SW 187 CT	igent and little if applicable (NOT ND DIRECTORS	13. 1.1 TIFLE 1.2 NAME 1.3 STREET	ADDRESS	red when reinstating)	DATE FICERS AND	DIRECTOR	RS IN 12
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SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P TABARES, FRANCISCO 9137 SW 187 CT MIAM FL 33198 S DE SANTOS, NANCY TABA 5898 SW 25TH ST	DELETE	13. 11 TITLE 12 NAME 13 STREET 14 CITY-SI 22 NAME 23 STREET	ADDRESS 1- ZIP ADDRESS	red when reinstating)	DATE FICERS AND	DIRECTOR Change	RS IN 12
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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 Block 12 or Block 13 if changing or on an attachment with an address.

SIGNATURE: