

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

FILED

Jun 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000078933 (6)

1. Corporation Name
MIAMI ASTRAL INC.

Principal Place of Business

9340 N.W. 13TH ST.
BAY 21
MIAMI FL 33172

Mailing Address

9340 N.W. 13TH ST.
BAY 21
MIAMI FL 33172

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/26/1994

4. FEI Number

65-0530420

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 9700 NW, 6 Lane

Suite, Apt. #, etc.

22 City & State
23 Miami FL

24 Zip 33172 25 Country

2a. Mailing Address

26 9700 NW, 6 LANE

Suite, Apt. #, etc.

27 City & State
28 Miami, FL

29 Zip 33172 30 Country

9. Name and Address of Current Registered Agent

TEIXEIRA, MANUEL
14415 N. KENDALL DRIVE
MIAMI FL 33183

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME TEIXEIRA, MANUEL
STREET ADDRESS 14415 N. KENDALL DRIVE
CITY-ST-ZIP MIAMI FL 33183

TITLE TD ☐ DELETE

NAME DEANDRADES, RICARDO
STREET ADDRESS 14415 N. KENDALL DRIVE
CITY-ST-ZIP MIAMI FL 33183

TITLE VD ☐ DELETE

NAME RODRIGUEZ, RAUL
STREET ADDRESS 14415 N. KENDALL DRIVE
CITY-ST-ZIP MIAMI FL 33183

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME TEIXEIRA, MANUEL
1.3 STREET ADDRESS 9700 NW, 6 Lane
1.4 CITY-ST-ZIP MIAMI, FL 33172

2.1 TITLE TD ☒ Change ☐ Addition

2.2 NAME DEANDRADE, RICARDO
2.3 STREET ADDRESS 9700 NW, 6 Lane
2.4 CITY-ST-ZIP MIAMI, FL 33172

3.1 TITLE VD ☒ Change ☐ Addition

3.2 NAME RODRIGUEZ, RAUL
3.3 STREET ADDRESS 9700 NW, 6 Lane
3.4 CITY-ST-ZIP MIAMI, FL 33172

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 changed, or on an attachment with an address.

SIGNATURE

Signature: TEIXEIRA MANUEL

5/21/98 (305)485.3588

CR2E034 (10/97)