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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Jan 15 1998 8:00am Secretary of State

								1				
Principal Place of Business Mailing Address							1 (\$411881 -10	18(11 B1611 B6111 B9111 1	80 (1) 98 1/9 (s.	 	PINNE NO.	
3716 ALCANTARA AVE. MIAMI FL 33178 MIAMI FL 33178												
								2 Data Issarra	DO NOT WRIT		SPACE	
								01/01/199				
	ace of Business		28.	Mailing Addres			· · · · · · · · · · · · · · · · · · ·	4. FEI Number	<i></i>			Applied F
1 11325		a Terrace		11325		62 11	errace	65-0544	008			Not Appli
Suite, Apt. (f, etc.		<u></u> ⊢¬	Suite, Apt. #, et	.C.			5. Certificate of	Status Desired			Addition Required
City & State			27	City & State				6. Election Cam	naign Einancing			May B
3 Mia	mi Fl	ORIDA	28	Miani	P			Trust Fund Co				d to Fees
Zip_		Country	-	Zip		Country	A		ion owes or has p			
3315		USA Address of Current	29	33178	<u>}</u>	30 V	SA	Personal Prop 10. Name and A	perty Tax due Jun			∐ No
MA	XIMILIEN, JOA	·	nogiati	NEU Agent		81	Name T	Λ/	\		Agent	
	18 ALCANTARA					82			JAXI MILY			
	MI FL 33178	1776				02	1132	iss (P.O. Box Numb 5 NW	PACCEDIA	errac	R	
						83						
						84	City 🔥	<u></u>			85 7ip	Code
						1 1	- " ' NA i	iami		FL.	. :	33 i
								· · · · · · · · · · · · · · · · · · ·				
office or re	o the provisions	of Sections 607.0502 or both, in the State of	2 and 60 of Florid	7.1508, Florida a. Such change	Statutes was au	s, the above- uthorized by	named corporation	oration submits this on's board of direct	statement for the ors. I hereby acce	purpose o apt the apt	f changing pointment a	its regist is registe
	o the provisions egistered agent, n familiar with, a	of Sections 607.0502 or both, in the State ond accept the obligat		/)~.	Statutes was au 05, Flori	s, the above- uthorized by rida Statutes.	named corporation	pration submits this on's board of direct	statement for the ors. I hereby acce	purpose o	f changing pointment a	its regist is registe •
SIGNATURE _	Ma		Conu	sec	14	us.	-named corporation	oration submits this on's board of direct	statement for the ors. I hereby acce	Purpose o	f changing pointment a	its regist is registe
SIGNATURE	Signature spod or prin	ue Max	Linu it and title if	Tapplicable.	(NOTE	Registered Agen	named corpo the corporation	oration submits this on's board of direction when reinstaing)	statement for the ors. I hereby acce HANGES TO OFFI	DI/DI	6 /9 8 DIRECTO) DRS IN 12
SIGNATURE 12.	Signature spood or prin	of FICERS AND	Linu it and title if	applicable.	(NOTE	Hegistered Agen 13. 11 TITLE	named corpo the corporation	oration submits this on's board of direction when reinstaing)		DI/DI	6/98	DRS IN 12
SIGNATURE 12. TITLE NAME	Signatury produce print PVST MAXIMILIEN	nted name of registered agen OFFICERS AND	Linu it and title if	Tapplicable.	(NOTE	Hegistered Agen 13. 11 TITLE 12 NAME	e-named corporation the corporation corporation is signalure require	oration submits this on's board of direction when reinstaing)		DI/DI	6 /9 8 DIRECTO) DRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	Tapplicable.	(NOTE	13. 11 TITLE 12 NAME 13 STREET A	e-named corporation the corporation of signalure require	oration submits this on's board of direction when reinstaing)		DI/DI	6 /9 8 DIRECTO) DRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signatury produce print PVST MAXIMILIEN	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	Tapplicable.	(NOTE	Hegistered Agen 13. 11 TITLE 12 NAME	e-named corporation the corporation of signalure require	oration submits this on's board of direction when reinstaing)		DI/DI	6 /9 8 DIRECTO	DRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	Applicable. TORS DELE	(NOTE	13. 11 TITLE 12 NAME 13 STREET A	e-named corporation the corporation of signalure require	oration submits this on's board of direction when reinstaing)		DI/DI	6 /9 8 D DIRECTO Change	DRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	Applicable. TORS DELE	(NOTE	13. 11 TITLE 12 NAME 13 STREET A 14 CITY - S1 21 TITLE	-named corporation of the corporation of signalure requires ADDRESS - ZIP	oration submits this on's board of direction when reinstaing)		DI/DI	6 /9 8 D DIRECTO Change	DRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	Toppheatile TORS DELE	(NOTE	Registered Agen 13. 11 TITLE 12 NAME 13 STREET A 14 CITY-S1 21 TITLE 22 NAME	e-named corporation In signalure require ADDRESS ADDRESS	oration submits this on's board of direction when reinstaing)		DI/DI	6 /9 8 D DIRECTO ☐ Change ☐ Change	DRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	Applicable. TORS DELE	(NOTE	Projectived Agent 13. 11 TITLE 12 NAME 13 STREET A 14 CITY-SI 21 TITLE 22 NAME 23 STREET A	e-named corporation In signalure require ADDRESS ADDRESS	oration submits this on's board of direction when reinstaing)		DI/DI	6 /9 8 D DIRECTO Change	DRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	Toppheatile TORS DELE	(NOTE	Fingistered Agent 13. 11 TITE 12 NAME 13 STREET A 21 TITE 22 NAME 23 STREET A 24 CHY-ST 31 TITE 32 NAME	e-named corporation the corporation of signalure requires ADDRESS 1- ZIP	oration submits this on's board of direction when reinstaing)		DI/DI	6 /9 8 D DIRECTO ☐ Change ☐ Change	DRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	Toppheatile TORS DELE	(NOTE	Fingistried Agent 13. 11 Title 12 NAME 13 STREET A 14 CITY-S1 21 Title 22 NAME 23 STREET A 24 CITY-S1 31 TITLE 32 NAME 33 STREET A	ADDRESS ADDRESS ADDRESS	oration submits this on's board of direction when reinstaing)		DI/DI	6 /9 8 D DIRECTO ☐ Change ☐ Change	DRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	OPELET	(NOTE)	Fingistered Agent 13. 11 TITE 12 NAME 13 STREET A 14 CITY-SI 21 TITLE 22 NAME 23 STREET A 24 CITY-SI 31 TITLE 32 NAME 33 STREET A 34 CITY-SI 34 CITY-SI	ADDRESS ADDRESS ADDRESS	oration submits this on's board of direction when reinstaing)		DI/DI	€ /9 8 D DIRECTO Change Change	ORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	Toppheatile TORS DELE	(NOTE)	Fingistried Agent 13. 11 Title 12 NAME 13 STREET A 14 CITY-SI 21 Title 22 NAME 23 STREET A 24 CITY-SI 31 TITLE 32 NAME 33 STREET A 41 TITLE	ADDRESS ADDRESS ADDRESS	oration submits this on's board of direction when reinstaing)		DI/DI	6 /9 8 D DIRECTO ☐ Change ☐ Change	ORS IN 12
SIGNATURE 112. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	OPELET	(NOTE)	Fingistered Agent 13. 11 TITE 12 NAME 13 STREET A 14 CITY-SI 21 TITLE 22 NAME 23 STREET A 24 CITY-SI 31 TITLE 32 NAME 33 STREET A 34 CITY-SI 34 CITY-SI	ADDRESS 1- ZIP ADDRESS 1- ZIP ADDRESS 1- ZIP	oration submits this on's board of direction when reinstaing)		DI/DI	€ /9 8 D DIRECTO Change Change	ORS IN 12
SIGNATURE 112. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	OPELET	(NOTE)	13. 11 TITLE 12 NAME 13 STREET A 14 CITY-SI 21 TITLE 22 NAME 23 STREET A 24 CITY-SI 31 TITLE 32 NAME 33 STREET A 34 CITY-SI 41 TITLE 4. 2 NAME	ADDRESS 1- ZIP ADDRESS 1- ZIP ADDRESS 1- ZIP	oration submits this on's board of direction when reinstaing)		DI/DI	€ /9 8 D DIRECTO Change Change	ORS IN 12
SIGNATURE 112. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	OPELET	(NOTE TE	13. 11 TITLE 12 NAME 13 STREET A 14 CITY-ST 21 TITLE 22 NAME 23 STREET A 24 CITY-ST 31 TITLE 32 NAME 33 STREET A 34 CITY-ST 41 TITLE 4. 2 NAME	ADDRESS 1- ZIP ADDRESS 1- ZIP ADDRESS 1- ZIP	oration submits this on's board of direction when reinstaing)		DI/DI	€ /9 8 D DIRECTO Change Change	DRS IN 12
SIGNATURE 112. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	OPELET	(NOTE TE	13. 11 TITLE 12 NAME 13 STREET A 14 CITY-ST 21 TITLE 22 NAME 23 STREET A 24 CITY-ST 31 TITLE 32 NAME 33 STREET A 34 CITY-ST 41 TITLE 4. 2 NAME 4.3 STREET A 4.4 CITY-ST	ADDRESS 1- ZIP ADDRESS 1- ZIP ADDRESS 1- ZIP	oration submits this on's board of direction when reinstaing)		DI/DI	Change Change	DRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	OPELET	(NOTE TE	13. 11 TITLE 12 NAME 13 STREET A 14 CITY-ST 21 TITLE 22 NAME 23 STREET A 34 CITY-ST 31 TITLE 32 NAME 33 STREET A 41 TITLE 4.2 NAME 4.3 STREET A 4.4 CITY-ST 5.1 TITLE 5.2 NAME 5.3 STREET A	ADDRESS 1- ZIP ADDRESS 1- ZIP ADDRESS 1- ZIP ADDRESS 1- ZIP	oration submits this on's board of direction when reinstaing)		DI/DI	Change Change	DRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	DELET	(NOTE) TE TE	13. 11 TITLE 12 NAME 13 STREET A 14 CITY-S1 21 TITLE 22 NAME 23 STREET A 34 CITY-S1 31 TITLE 32 NAME 33 STREET A 34 CITY-S1 41 TITLE 4.2 NAMF 4.3 STREET A 4.4 CITY-S1 5.1 TITLE 5.2 NAME 5.3 STREET A	ADDRESS 1- ZIP ADDRESS 1- ZIP ADDRESS 1- ZIP ADDRESS 1- ZIP	oration submits this on's board of direction when reinstaing)		DI/DI	Change Change Change Change	DRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	OPELET	(NOTE) TE TE	13. 11 TITLE 12 NAME 13 STREET A 14 CITY-ST 21 TITLE 22 NAME 23 STREET A 24 CITY-ST 31 TITLE 32 NAME 33 STREET A 44 CITY-ST 51 TITLE 52 NAME 53 STREET A 54 CITY-ST 61 TITLE	ADDRESS 1- ZIP ADDRESS 1- ZIP ADDRESS 1- ZIP ADDRESS 1- ZIP	oration submits this on's board of direction when reinstaing)		DI/DI	Change Change	DRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST MAXIMILIEN 3716 ALCAI	OFFICERS AND JOANNE M NTARA AVE.	Linu it and title if	DELET	(NOTE) TE TE	13. 11 TITLE 12 NAME 13 STREET A 14 CITY-S1 21 TITLE 22 NAME 23 STREET A 34 CITY-S1 31 TITLE 32 NAME 33 STREET A 34 CITY-S1 41 TITLE 4.2 NAMF 4.3 STREET A 4.4 CITY-S1 5.1 TITLE 5.2 NAME 5.3 STREET A	-named corporation the corporation of signalure requires ADDRESS - ZIP ADDRESS 1 - ZIP ADDRESS 2 - ZIP ADDRESS - ZIP	oration submits this on's board of direction when reinstaing)		DI/DI	Change Change Change Change	DRS IN 12

Joanne Maximi Llen