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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90117 006 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000001166

Corporation Name

Principal Place of Business

CITY-ST-ZIP

SIGNATURE:

DIROJEN CORPORATION

7755 SW 87TH AVENUE SUITE 100 MIAMI FL 33173		7755 SW 87TH AVENUE SUITE 100 MIAMI FL 33173		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/04/1995			
2. Principal Place of Business		2a, Mailing Address			4. FEI Number		Applied For
21		26		65-0565045		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		5 Additional	
22		Oit 9 State					
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip	Country	Zip			8. This corporation owes the current year Intangible		
24	25	29 30			Personal Property Tax. Yes □ No		□No
,	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent	
43/41	1 201112		81	Name			į
ayala, ronald 7755 SW 87TH Avenue			82 Street Add		ress (P.O. Box Number is Not Acceptable)		
SUITE 100			83				
MAIM	AI FL 33173		84	City		85 2	Zip Code
				,	<u> </u>	-	
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: Regi	istered Ager	nt signature required	d when reinstating) DATE		
12.	OFFICERS AND		13		ADDITIONS/CHANGES TO OFFICERS AN	ND DIRE	CTORS IN 12
TITLE	PVPS	☐ DELETE	1,1 TITLE			Char	nge
NAME	AYALA, RONALD		1.2 NAME	j			
STREET ADDRESS	7755 SW 87TH AVENUE		1.3 STREE	TADDRESS			
CITY-ST-ZIP			1.4 CITY-S	T-ZIP			
TITLE	T	☐ DELETE	2.1 TITLE			Char	nge 🗀 Addition
NAME	7.7.12 11 11 11 11 11 11 11 11 11 11 11 11 1		2.2 NAME				İ
STREET ADORESS			2.3 STREE	T ADDRESS			
CITY-ST-ZIP			2. 4 CITY- 9	T-ZIP			- Addition
.TITLE			3.1.TITLE			Char	nge _ Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP		[] Char	nge Addition
TITLE		☐ DELETE	4.1 TITLE 4.2 NAME			L] Cisal	ige Addition
NAME STREET ADDRESS				TADORESS			
			4.4 CITY-S	1			
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE	1-ZIF		[] Char	nge Addition
NAME			5.2 NAME		•		
STREET ADDRESS		j	5.3 STREE	T ADDRESS			Į
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			ļ
TITLE		☐ DELETE	6.1 TITLE			[] Char	nge 🔲 Addition
NAME			6.2 NAME				ł
STREET ADDRESS			6.3 STREE	TADDRESS			. }

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, with all other like empowered.