**FILED** 

Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90125 043 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9500007454

1. Corporation Name

MASTER BUSINESS CORPORATION

Principal Plac	e of Business	Mailing Address			III OOIII IOOII Oloot Oiil oiot lob
ATTN: MARCELO HAIMENIS ATTN: MARCELO HAIMENIS			\$		
7973 NW 21 ST. 7973 NW 21 ST.				·	
MIAMI FL 33122 MIAMI FL 33122				DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualifed	
<u></u>				01/23/1995	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0553036	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5 Certificate of Status Desired	\$8.75 Additional Fee Required
22		27			
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
23		28		Trust Fund Contribution	
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible ☐ Yes No
24	25	29		Personal Property Tax.  10. Name and Address of New Registers	
	9. Name and Address of Curro	ent Registered Agent	81 Name	10. Name and Address of New Registere	su Agent
RAN	ID, SERGIO			perajo Band	
8320 NW 14 STREET			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	MI FL 33126		# 83°	14 NW 14 STREET	
MPA	MI FL 33120		83		
			84 City	•	85 Zip Code
			His	177) F	
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statu	tes, the above-named con	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	of changing its registered
office or a	registered agent, or both, in the Stat am familiar with, and accept the oblig	gations of, Section 607.0505, Flo	orida Statutes.	for a board of directors. Thereby accept the app	Some de rogistere
SIGNATURE	· · · · ·	•			
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable. (NOT	E: Registered Agent signature require	ed when reinstating) DATE	,
12.	OFFICERS A	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	DELETE	1.1 TITLE	Band Some	Change Addition
NAME	BAND, SERGIO		1.2 NAME .	Sand, Sergio	
STREET ADDRESS	8320 NW 14 STREET		1.3 STREET ADDRESS 3	274 NW 145treet	
CITY-ST-ZIP	MIAMI FL 33126		: 14 CITY-ST-ZIP	Nami FL 33126	
TITLE	P	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	HAIMENIS, MARCELO	·	- 22 NAME		<del></del>
STREET ADDRESS	9782 NW 31ST STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33172		2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		]
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME	•	
			53 STREET ADDRESS		
STREET ADDRESS	]		54 CITY-ST-ZIP		
CITY-ST-ZIP		DELETE	6.1 TITLE		Change Addition
TITLE			6.2 NAME		
NAME	1				
STREET ADDRESS		_	6.3 STREET ADDRESS		1

14. hereby certify that the information supplied with this filling 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 of 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 adoless, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPED OR