## 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

1998

DOCUMENT # P95000017446 (2)

	LITE ENTERPRISES GROUP, CO	TRP.			
_	LIFE GITTER FROED GROOT FO	51N ·		i 1889 ila jandi alim adali dalih adali dalih adali	JIBIH 18611 BIBIH BIBIB BIH 1861
Principa	l Place of Business	Mailing Address			udin idali aram Eleib dist iadi
	S.W. 183RD AVE. MAR FL 33029	P.O. BOX 823205 SOUTH FLORIDA FL 33 US	082	DO NOT WRITE IN THIS	SPACE
		•		3. Date Incorporated or Qualified	
				03/02/1995	
2. Princ	ipal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0563240	Not Applicable
Suite 22	, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
	& State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
24	25	29	30	Personal Property Tax due June 30.  10. Name and Address of New Registered	Yes No
	9. Name and Address of Curren	t Hegistered Agent	81 Name	10, Name and Address of New Registered	Agent
	GONZALEZ, ADRIANA M		Valle		
2666 S.W. 183RD AVE.			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
	MIRAMAR FL 33029		83		
			84 City	FL	85 Zip Code
<b>11.</b> Pure	suant to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	es, the above-named co	orporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	of changing its registered
offic	se or registered agent, or both, in the State nt. Lam familiar with, and accept the obliga	of Florida, Such change was a stions of Section 607 0505. Flo	iuthorized by the corpor orida Statutes	ration's board of directors. I hereby accept the ap	pointment as registered
SIGNAT	URE	•			
40	Signature types or presed is an entrop stored age OFFICERS AN		Registered Agent signature red	ADDITIONS/CHANGES TO OFFICERS AN	D DIDECTORS IN 10
12.	PSTD	DELETE		P	Change Addition
NAME	GONZALEZ, ADRIANA M.	EL OCCUP	1.2 NAME	GONZALEZ, ADRIANA M.	• • •
STREET AD	4444 A IVI 444BB 41#		1.3 STREET ADDRESS	2666 5.W. 183rd AVE	/And
CITY-ST-Z	ANDASSAD EL			MIRAMAR FI 33029	[ []
TITLE	VD	DELETE	2.1 TITLE	67	Change Addition
NAME	DEITURRADO, LUCIA J.		2.2 NAME	COLORADO, JESUS	Λ
STREET ADI	0000 0 HZ 40000 ALE		2.3 STREET ADDRESS	2666 S.W. 18348 MY	
CITY-ST-Z	P MIRAMAR FL		2. 4 CITY-ST-ZIP	MIRAMAR PI 33029	
TITLE	VP	DELETE	3.1 TITLE		Change Addition
NAME	GONZALEZ, RICHARD		3.2 NAME		
STREET ADI			3.3 STREET ADDRESS		
CITY-ST-Z			3.4. CITY-ST-ZIP		
TITLE	†D	DELETE	4.1 THTLE		Change Addition
NAME	PAEZ, MARIA		4. 2 NAME		,
STREET AD			4.3 STREET ADDRESS		
CITY-ST-Z	<del>-  </del>		4.4 CITY - ST - ZIP		Date - Distance
TITLE	D D	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	COLORADO, JESUS		5.2 NAMÉ		
STREET ADI	A 44 TO 4 A 4 TO 4 TO 4		5.3 STREET ADDRESS		
CITY-ST-Z		DELETE	5.4 CITY - \$1 - ZIP		Change Addition
TITLE	JARAVA, ROSARIODEL C	ר ו מנרנונ	6.1 TITLE		LI Change LI Audillon
NAME	· · · · · · · · · · · · · · · · · · ·		6.2 NAME		
STREET ADI	4415 4 4 4 5 Ft		6.3 STREET ADDRESS		
	iv i <b>andamiki fi</b>		6.4 CITY-ST-ZIP		<b>F</b>

14. Thereby 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 supplicmental 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 13 if changed, or on a call attachment with an address.

× 04/20/98 (954) 450-399.

**FILED** 

Apr 24 1998 8:00am

Secretary of State