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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 13 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000018417 (2)

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Principal Place of Business	Mailing Address		[108  86  108  108  3  10  10  10  10  10  10  10  10  10	
121 S.E. 1ST STREET	<del>-</del>			
APT 306	121 S.E. 1ST STREET APT 306			
MIAMI FL 33131 MIAMI FL 33131			DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified	
<b>A</b> District Out of the control of t			03/07/1995	
2. Principal Place of Business	<b>2a.</b> Mailing Address	e ·	4. FEI Number	Applied For
Suite, Apt. #, etc.	26] Suite, Apt. #, etc.		65-0563327	Not Applicable
22	27		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	Cily & State		6. Election Campaign Financing	
23	28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the co	
24 25	29	30	Personal Properly Tax due June 30.	Ø-¥tes □ No
9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Registered	Agent
FREITAS, ARILDO		81 Name		
121 S.E. 1ST STREET		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33131				
		83		
		84 City		85 Zip Code
45 Durayant to the provisions of Costions 607.6	F 02 and C07 4 (00 Flatille Cont.)			L. I I
11. Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Stagent. I are familiar with, and accept the ob-	ate of Florida. Such change was	ies, the above-hamed corp authorized by the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing its registered pointment as registered
	ligations of, Section 607.0505, H	orida Statutos.	, , , , , ,	,
SIGNATURE Signature, typed or printed name of registered	accut and trie if applicable (NO)	L. Flegislered Agent signature requi	red when reinstating) DATE	
12. OFFICERS A			DATE	
	MAD DIVERSONS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE DPS	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12  Change Addition
NAME FREITAS, ARILDO			ADDITIONS/CHANGES TO OFFICERS AN	
NAME FREITAS, ARILDO STREET ADDRESS 121 S.E. 1ST STREET		1.1 THILE	ADDITIONS/CHANGES TO OFFICERS AN	
NAME FREITAS, ARILDO STREET ADDRESS 121 S.E. 1ST STREET CITY-ST-ZIP MIAMI FL 33131	DELETE	1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS AN	
NAME FREITAS, ARILDO STREET ADDRESS 121 S.E. 1ST STREET MIAMI FL 33131 TITLE		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AN	
NAME FREITAS, ARILDO STREET ADDRESS CHTY-ST-ZIP MIAMI FL 33131 TITLE NAME	DELETE	1.1 TITLE 1.2 NAME 1.3 STREE1 ADDRESS 1.4 CITY- ST- ZIP	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
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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 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.