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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**FILED** 

May 11 1998 8:00am

Secretary of State

DOCUMENT # 1. Corporation Name

Principal Place of Business

P95000023474 (6)

Mailing Address

6221 ENTERPRISES, INC.

9032 NW 73RD CRT PARKLAND FL 33067 US		6032 NW 73RD CRT Parkland Fl 33067 US			DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualified 03/22/1995				
2. Principal I	Place of Business	2a. Mailing Addre	ss			4. FEI Number	Applied For			
21		26				65-0649839	Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, 6	elc.				red \$8.75 Additional			
22		27				5. Certificate of Status Desired	J 			quired
City & Sta	ite	City & State				6. Election Campaign Financing		\$5	.00	May Be
23		28				Trust Fund Contribution	]	Ac	Ided t	o Fees
Zŧp	Country	Zip	Cour	ntry	1	8. This corporation owes or has paid th				
24	25	29	30			Personal Property Tax due June 30.		Yes		] No
	9. Name and Address of Curre	nt Registered Agent		1	T 4.	10. Name and Address of New Regist	ered A	gent		
	trematerra, louis		i	81	Name					
	8032 NW 73RD CRT Parkland FL 33067					ress (P.O. Box Number is Not Acceptable)				
`			Ì	83						
			Ì	84	City		FL	85	Zip C	Code
l office or	registered agent, or both, in the Stat am familiar with, and accept the obli	e of Florida. Such chang gations of, Section 607.0	e was authorized 505, Florida Statu	i by utes	y the corporat s.	poration submits this statement for the purportion's board of directors. I hereby accept the	ose of a	chang intme	ing its	s registered registered
40	Signature, typed or panted name of registered as	ND DIRECTORS		Age	ent signature fequil	ADDITIONS/CHANGES TO OFFICERS		DIDE	CTÓR	Ć INI 12
12.	OFFICERS AT	DEL DEL	13. ETE 1,1 TIT	16		ADDITIONS/CHANGES TO OFFICERS		Ch		Addition
NAME	TREMATERRA, LOUIS	DEC	1.2 NA						,go	
	6032 NW 73RD CRT				ADDRESS					
STREET ADDRESS	PAPARKLAND FL		•							
CITY-ST-ZIP TITLE	FAFANNUARD FL	☐ DEL	1.4 CIT ETE 2.1 TIT		51 - ZIP	· · · · · · · · · · · · · · · · · · ·		Ch	ange	☐ Addition
		_ DEC	2.2 NAI				•		iii go	routon
NAME			1		LEGREGO					
STREET ADORESS					ADDRESS					
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NAME OFFICE ADDOLOG					ADDRESS					
STREET ADDRESS			3.4. CIT							
CITY-ST-ZIP TITLE	<del></del>	DEL			a) - ZIr			Ch	an <b>o</b> e	Addition
NAME		س کے	4.2 NA							
STREET ADDRESS	1				ADDRESS					
•			4.3 S I C							- <u>-</u>
CITY-ST-ZIP TITLE	<del>                                     </del>	□ DEL			21-21	<del></del>		Ch:	ange	Addition
NAME		_ 511	5.1 MI				•	, ~	e. 1 <b>2</b> 1	
					ADDRESS					
STREET ADDRESS										
CITY-ST-ZIP TITLE	<del> </del>	DEL	5.4 CIT ETE 6.1 TIT		11 - ZIP	······································		Chi	anne	Addition
	1	□ ntt			1				an <b>y</b> o	Audinon
NAME	1		6.2 NAI							
STREET ADDRESS			6.3 STF	REET	ADDRESS					

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 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 extress.