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

DOCUMENT # P95000024800 (1)

ONIDGE INC

FILED Feb 26 1998 8:00am Secretary of State

ONIFOE, INC.				E HADDADE HID HOLD BONE DOUB COM	A 1881 1881 1881 1881 1881 1881 1881 1881
Principal Piece of Business		Mailing Address		1 100111001 110 10101 01111 00111 00111	āfili 6ālie irāji 21881 lēlis 6ājil 8811 lābi
11621 SW 102 ST		10836 N. KENDALL			
MIAMI FL 331	176	APT. V-3 Miami Fl 33176		DO NOT WRI	TE IN THIS SPACE
		US		3. Date Incorporated or Qualified	
				04/01/1995	
	iace of Business 69th TERR.	2a. Mailing Address	10#1	4. FEI Number	Applied For
21 7920			. 69 Th TBRR	65-0571741	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23 MiA		28 Miami, FL	orida.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has p	
24 33/43-2604 25 DADE . 29 33/43.2604.30			DADE.	Personal Property Tax due Jur	ne 30. 🔲 Yes 🔲 No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
ESPINO, MERCEDES B				ercedes e. Esp	ino.
11621 S.W. 102 ST.			Street Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33176			792	0 S.W. 69TH TERM	<u> </u>
			83		
			84 City	liami	FL 85 Zip Code
11. Durayant to the province of Copiese 607 0502 and 607 1509. Florido Clatudas the above					<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 Signafire, typed or philifold name of registered agrif and title of applicable. (NOTE: Registered Agent signature require				uired when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE	PTD	DELETE	1.1 TITLE	7/1/2	Change Addition
NAME	ESPINO, JORGE C		1.2 NAME	ESPINO JORGE C	
STREET ADDRESS	11621 SW 102 ST			7920 S.W. 6974 TE	ee.
CITY-ST-ZIP	MIAMI FL 33176		1.4 CITY-ST-ZIP	<u>niami, pl. 3314.</u>	3-2604
TITLE	VD	DELETE		//D	Change Addition
NAME	ESPINO, MERCEDES B		2.2 NAME	SPINO, MERCEDES	3 .
STREET ADDRESS	11621 S.W. 102 ST.		2.3 STREET ADDRESS	7926 E.W. 6979 TE	
CITY-ST-ZIP	MIAMI FL	DELETE		niami, pl. 33143-	Change Addition
TITLE	VSD Berrios, Luis P	L Detter	3.1 TITLE		ChangeAddition
NAME CYPTEZ ADDOCCC	10836 N. KENDALL DRIVE, V-3)	3.2 NAME		
STREET ADDRESS	MIAMI FE	•	3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
CITY-ST-ZIP TITLE	THICHE I C	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		ſ
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE ,	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CiTY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I hereby c	ertify that the information supplied with	this filing does not quality for	the exemption stated in	Section 119.07(3)(i), Florida Statutes.	further certify that the information

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.

SIGNATURE:

1-15-98

305- 410-5862