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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Sanora B. Mortnan

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000028821 (3)

FILED Jan 22 1998 8:00am Secretary of State

G. AMAT BOBCAT SERVICES INC.							
Principal Place of Business Mailing Address							
280 N.W. 125TH AVENUE 280 N.W. 125TH AVENUE							
MIAMI FL 33182 MIAMI FL 33182						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
						04/12/1995	
	face of Business	2a. Mailing Address				4. FEI Number Applied For	
21		26			65-0578974 Not Applica	bie	
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired \$8.75 Additional	l
22		27	 		-	Fee Hequired	
City & State	e	City & State			6. Election Campaign Financing \$5.00 May Be		
23 Zip	28 Country Zip Co			ntry		Trust Fund Contribution Added to Fees	
⊢ – ·	25		10 COU	жу		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
24	9. Name and Address of Curren		iu _l	—		10. Name and Address of New Registered Agent	
ANA				81	Name		
AMAT, GERARDO V 280 N.W. 125TH AVENUE				_			
MIAMI FL 33182			ĺ	82	Street Addres	ss (P.O. Box Number is Not Acceptable)	
MINU	WI 1 L 33 102		ŀ	83			
			Ļ				
				84	City	FL 85 Zip Code	
							ed
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.							
	William William Good Francisco	1,0.15 61, 0000011 651,0000, 110.1	ou ou	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re-			Registered	Agen	nt signature required		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE			Change Addit	tion
NAME	AMAT, GERARDO V		1.2 NAME				
STREET ADDRESS	280 N.W. 125TH AVENUE				ADDRESS		
CITY-ST-ZIP	MIAMI FL 33182		1.4 CIT		- ZIP		
TITLE	STD	DELETE	2,1 TITLE		ļ	Li Change Li Addit	on
NAME	AMAT, ACELA G		2.2 NAME				
STREET ADORESS	280 N.W. 125TH AVENUE		2.3 STREET		_		1
CITY-ST-ZIP	MIAMI FL 33182	DE: CT	2. 4 GITY - S		- ZIP	Change Addit	lion
TITLE	ARAT IAMED	☐ DELETE	3.1 TITLE			Change L Addit	noi.
NAME	AMAT. JAVIER		3.2 NAME 3.3 STREET				
STREET ADDRESS	280 NW 1256TH AVE		1				ł
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	3.4. CITY - 4.1 TITLE		- 212	Change Addit	ion
NAME			4. 2 NAME		İ		
STREET ADDRESS			4.3 STREET ADDRESS		Annores		- 1
CITY-ST-ZIP			4.4 CITY-ST-ZIP		I		
TITLE		DELETE	5.1 TITLE		- 201	☐ Change ☐ Addit	ion
NAME			5.2 NAME				1
STREET ADDRESS			5.3 STREET ADDRESS		ODRESS		
CITY-ST-ZIP			5.4 CITY - ST - 2				
TITLE		DELETE	6.1 TITLE			Change Addit	ion
NAME		_	6.2 NAME			_ · · <u> </u>	
					DDRESS		

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 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.

SIGNATURE:

305-226-4473