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 # P95000031744 (2)

FILED Feb 10 1998 8:00am Secretary of State

ORSO	INVESTMENTS, INC.							
Principal Place	of Business	Mailing Ac	ddress			-{ 1 (84)(80) 440 (810) 810) 86)(1 44)(1 86)(1	16 (140) (101) (101)	
782 N.W. 42ND AVENUE 782 N.W. 42ND AVENU SUITE 340 SUITE 340 MIAMI FL 33126 MIAMI FL 33126			y. 42ND AVENUE 340			DO NOT WRITE IN TH	IS SPACE	
						3. Date Incorporated or Qualified 04/24/1995		
2. Principal Pla	ace of Business	2a. Mailinc	Address			4. FEI Number	- IA	Applied For
21		26	,			65-0576937		ot Applicable
Suite, Apt. #	l, etc		Apt. #, etc.			5. Certificate of Status Desired		Additional
22		27				6. Certificate of Status Desired	Fee R	Required
City & State		City &	State			Election Campaign Financing		May Be
23		28	····-			Trust Fund Contribution		lo Fees
Ziρ	Country	Z(p	l.	Country		8. This corporation owes or has paid the		ntangible
24	25 9. Name and Address of Curre	29 Dt Registered A		30	···-	Personal Property Tax due June 30. 10. Name and Address of New Registers		□ NO
97	. 12	in ringistored A	you	81	Name	(U. Numo uno Address of Hen Hogistale	a Agoin	
	OLE, MARIANO							
762 N.W. 42ND AVENUE SUITE 340				62	Street Addre	ess (P.O. Box Number is Not Acceptable)		İ
	AMI FL 33126			83			······································	
mis	Ami 1 6 00 120							
				84	City	F	85 Zip	Code
11. Pursuant to	o the provisions of Sections 607 056 gistered agent, or both, in the State of familiar with, and accept the oblic	02 and 607,1508 r of Florida, Such rations of Section	. I lorida Statutes i change was au o 607.0505. Flor	s, the above uthorized by ida Statutes	named corporation	pration submits this statement for the purpose on's board of directors. I hereby accept the a		its registered s registered
SIGNATURE								
S	agnative typed or protect harve of registeresting		atom) ul		nt signature required		,	50.00.40
12.	DEFICERS AN	ID DIRECTORS	DELFTE	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	
TITLE	ORTEGON, LUIS			1.1 TITLE			Criange	L ADDITION
NAME	5220 N.W. 72ND AVE. BLD	a o		1.2 NAME				
STREET ADDRESS	MIAMI FL	Q. 2		1.3 STREET	ì			l
CITY-ST-ZIP TITLE	DP		DELETE	2.1 TITLE	1-711		Change	Addition
NAME	SOLE, MARIANO			2.2 NAME				
STREET ADDRESS	782 NW 42 AVE S-340 BLD	OG. 2		2.3 STREET	ADDRESS			
CiTY-S1-ZiP	MIAMI FL 33126	_		2 4 CITY-S	1			
TITLE			DELETE	3.1 TITLE			☐ Change	Addition
NAME				3 2 NAME			_	
STREET ADDRESS				3 3 STREET	ADDRESS			
CITY-ST-ZIP				34 CITY-S	T-71P			
TITLE			DELFTE	41 TITLE			Change	Addition
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST	r- ZIP		- <u>, </u>]
TITLE			DELETE	5 1 TITLE			Change	☐ Addition
NAME				5.2 NAME				į
STREET ADDRESS				5.3 STREET	address			ļ
CITY-ST-ZIP				5.4 CITY - S1	1-ZIP			
TITLE			DETETE	6 1 TITLE			L Change	Addition
NAME				62 NAME				
STREET ADDRESS				63 STREET	ì			Į
CITY-ST-ZIP				64 CITY-ST		440 000000 51 6	49	
14. I hereby co	ortify that the information supplied v	vith U nis filing dog	s not qualify for	the exempt	ion stated in S	Section 119.07(3)(i), Florida Statutes. I further	certify that th	e Information

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 informatio indicated on this annual report or suppliemental around report is flue 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 burstoe empowered to execute this raport as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 of Changed or on an attendment of the receiver or burstoe empowered to execute this raport as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of Changed or on an attendment of the receiver or burstoe.

SIGNATURE:

Proco 1/29/98 3054

05-441-2655