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

**CORPORATION** ANNUAL REPORT **1998** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500031956 (2)

**FILED** Jan 30 1998 8:00am Secretary of State

RFC, II			· <b>/</b>			 	<u>                                      </u>	
Original Disc		A. (1. A. (1.						
•	e of Business	Mailing Address						
1013 OBISPO AVE CORAL GABLES FL 33134  CORAL GABLES FL 33134  CORAL GABLES FL 33134						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	THO OF ACE	
						04/20/1995		
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				65-0675656		Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	ille, Apt. #, etc.			5. Certificate of Status Desired	\$8.7	5 Additional
22		27				5. Continuate of Status Desired	' Fee	Required
City & Stat	6	City & State				6. Election Campaign Financing		<b>)0</b> May Be
Zip	Country	28				Trust Fund Contribution		ed to Fees
24	25	Zip	Cou	niry		8. This corporation owes or has paid th		
[4]	g, Name and Address of Curr	29 ent Registered Agent	30			Personal Property Tax due June 30.  10. Name and Address of New Registe	red Ament	□ No
AD	AN, FERNANDO S			81 Nan	ne	10. Hamo and Padross of New Yorks	olou Agent	
710 S DIXIE HWY					<del></del>			
CORAL GABLES FL 33146				<b>82</b> Stre	et Addre	Address (P.O. Box Number is Not Acceptable)		
	100 000000		ļ	83				
			ļ					
				84 City			FL 85 Z	ip Code
Office or r	egistered agent, or both, in the Sta im familiar with, and accept the obli- Signature, typed or printed name of registered a	le of Florida. Such change was gations of, Section 607.0505, I	s authorized Florida Stati	d by the cutes.	corporatio	oration submits this statement for the purpo on's board of directors. I hereby accept the distribution reinstating)	appointment	as registered
12.	· <del></del>	ND DIRECTORS	13.	Alent Bigns	TOTO TEQUIPA	ADDITIONS/CHANGES TO OFFICERS		ORS IN 12
TITLE	D DELETÉ  BECK, JUELENE S			1.1 TITLE			Chang	
NAME			1.2 NAME					
STREET ADDRESS	1013 OBISPO AVE		1.3 \$11	REET ADDRES	s			
CATY-ST-ZIP	CORAL GABLES FL 33134		1.4 CIT	Y-ST-ZIP	1			
TITLE		DELETE	2 1 TIT	LE			☐ Chang	e 🔲 Addition
NAME			2.2 NA	ME				
street address	•		2.3 ST	reet addres	is			
CITY-ST-ZIP			2. 4 Ci	TY-ST-ZIP				
TITLE		DELETE	3.1 TIT				Chang	e 🔲 Addition
NAME			3.2 NA					ļ
STREET ADDRESS				REET ADDRES	s			
CITY-ST-ZIP		DELETE		TY-ST-ZIP			111.00	
TITLE NAME		☐ DELETÉ	4.1 111				Chang	e L Addition
NAME OTREET ADDRESS			4. 2 NA					
STREET ADDRESS				REET ADDRES	3			ı
CITY-ST-ZIP TITLE		DELETE	5.1 TITI	Y-ST-ZIP			Chang	e Addition
NAME		<u> </u>	5.2 NAF				- Ondrig	· C ROOMON
STREET ADDRESS				ree1 addres	s l			-
CITY-ST-ZIP			4	Y-ST-ZIP				
TITLE		☐ DELET <b>E</b>	6.1 T(T)	····			Change	e Addition
NAME			6.2 NA					
STREET ADDRESS				EET ADDRES	s			ł
CITY-ST-ZIP	_		6.4 CIT	Y-ST-ZIP				. ]
14. I hereby c	ertify that the information supplied	with this file g does not qualify	for the exer	nption sta	ated in Se	ection 119.07(3)(i), Florida Statutes. I furthe	er certify that t	he information

sport is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an instead of security that the informatic instead of security and that my name appears in address. indicated on this annual officer or director of the Block 12 or Block 13 if p

01/23/98