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Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000037976 (4)

1. Corporation Name

ORANGETREE BLOSSOM, INC.

Principal Place of Business

1657 WEST 39TH PLACE
HIALEAH FL 33012-7014

Mailing Address

1657 WEST 39TH PLACE
HIALEAH FL 33012-7014



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/12/1995

4. FEI Number

65-0587654

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BIRNBAUM, MARC
20801 BISCAYNE BLVD.
SUITE 400
MIAMI FL 33180

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME GLUCK, MAURICIO
STREET ADDRESS 1657 WEST 39B PLACE
CITY - ST - ZIP HIALEAH FL

1.1 TITLE

S/T

☒ Change ☐ Addition

TITLE D ☒ DELETE

NAME DUNAIEVSKY, DOV
STREET ADDRESS 1674 MERIDIAN AVE. #408
CITY - ST - ZIP MIAMI BEACH FL 33139

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE S ☐ DELETE

NAME CABRERA, ROGER A
STREET ADDRESS 1655 WEST 39 PLACE
CITY - ST - ZIP HIALEAH FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☒ Change ☐ Addition

TITLE P ☐ DELETE

NAME ALDO BARTOLONE
STREET ADDRESS 1655 WEST 39 PL
CITY - ST - ZIP HIALEAH

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☒ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

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:

Mauricio Gluck

2/2/98

3253624512

CR2E034 (10/97)