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 # P95000042704 (3)

MAY HOLDINGS, INC.

FILED May 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					
6755 S.W. 75TH AVE. 6755 S.W. 75TH AVE. MIAMI FL 33143					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified 06/01/1995
	lace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			65-0585158 Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired
City & State		City & State	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
∠ip	Country	Zip	 -1		8. This corporation owes or has paid the current year Intangible
24	25	29	[30]		Personal Property Tax due June 30. 🔀 Yes 🔲 No
01	9. Name and Address of Curr	ani Registered Agent		1 Name	10. Name and Address of New Registered Agent
SUAREZ, JAIME			Ľ	Name	
67 55 S W 75TH AVE Miami Fl 33143			8	2 Street Ad	ddress (P.O. Box Number is Not Acceptable)
			8	3	
			8	4 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statut	les, the abo	ve-named co	propration submits this statement for the purpose of changing its registered
agent. I a	egistere d agent, or both, in the Stal m fam iliar with, and accept the obli	to of Florida. Such change was a gations of, Section 607.0505, Fl	authorized orida Statut	by the corpores.	ration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable (NOT	E: Registered A	gent signature rec	quired when reinstating) DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSD	☐ DELETE	1.1 TITLE		Change Addition
NAME	SUAREZ, JAIME		1.2 NAM	E	
STREET ADDRESS	6755 S.W. 75TH AVE.	# FL 20140		ET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33143		1.4 C(TY		
TITLE		☐ DELETE	21 1111	Į.	☐ Change ☐ Addition
NAME			22 NAM		
STREET ADDRESS				E1 ADDRESS	
CITY-\$T-ZIP TITLE			2. 4 CITY 3.1 TITLE	-ST-ZIP	Change Addition
NAME			3.1 HILE 3.2 NAM		Civalige [_] Auticul
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	1		- 1	-ST-ZIP	
TITLE			41 TITLE		Change Addition
NAME			4. 2 NAM	le	
STREET ADDRESS			4.3 STRE	ET ADDRESS	
CITY-ST-ZIP			4.4 CITY		
TITLE		☐ DELETE	5.1 TITLE	1	☐ Change ☐ Addition
NAME			5.2 NAM	:	
STREET ADDRESS			5.3 STRE	ET ADDRESS	
CITY-ST-ZIP		·····	5.4 CITY	-S1-ZIP	
TITLE		DELETE	61 TITLE		Change Addition
NAME			6.2 NAM	·]	
STREET ADORESS			6.3 STRE	ET ADDRESS	
CITY-ST-ZIP			6.4 CITY	S1-ZIP	in Continue (d.O.O.Y.O.V.). Florida Crate de a Linguista considerate de la latera de latera de la latera de latera de la latera de latera de la latera de latera de la latera de latera de la latera de la latera de la latera de la latera de latera de la latera de latera de latera de latera de la latera de la latera de la latera de latera de la latera de latera de latera de latera de latera dela latera della

| St-zip | | 64 CITY-St-zip | | 1 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 didicated 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 of the receiver of truster 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 interment with an address.

CIGNATURE.