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PROFIT
CORPORATION
ANNUAL REPORT
1998

STREET ADDRESS

CITY-\$T-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 23 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000043408 (0)

WESTCHESTER MERCHANT ASSOCIATION, INC.

Principal Place of Business Mailing Address 8426 CORAL WAY 8426 CORAL WAY MIAMI FL 33155 MIAMI FL 33155 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/06/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0596584 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent VALENZUELA, TOMAS 8472 CORAL WAY 62 **MIAMI FL 33155** 63 sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered soft, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered except the originations of, Section 607.0505, Florida Statutes. 11. Pursuant to he provision SIGNATU egistere. Egent and title if applicable (NOTE: Registered Agent signature required when reinstating) CERS AND DIRECTORS 13. DELETE 1.1 TITLE TITLE CARMEN BRIZvalènzúela, tomas 1.2 NAME NAME 8472 COBALWAY STREET ADDRESS 1.3 STREET ADDRESS MIAMIFL 33155 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition HERNANDEZ, NUHA NAME 2.2 NAME 8516 CORAL WAY STREET ADDRESS 2.3 STREET ADDRESS MIAMLEL 33155 CITY-ST-ZIP 2.4 CiTY-ST-ZIP **DELETE** Addition TITLE 3.1 TITLE CANAGI, ALBERTO 8462 CORAL WAY NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-7IP DELETE TITLE 5.1 TITLE ☐ Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ANDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

> 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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.