## 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 #
1. Corporation Name P95000046645 (4)

1425 S.W. 5 STREET CORP.

## **FILED** Mar 26 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address			00114 01019 01110 01116 010 <b>7</b> 4 0111 1 <b>8</b> 41		
2414 S.W. 8TH ST.		2414 S.W. 8TH ST.					
MIAMI FL 33135		MIAMI FL 33135					
					DO NOT WRITE I	N THIS SPACE	
					3. Date Incorporated or Qualified		
2. Principal F	Place of Business	2a. Mailing Address			06/15/1995 4, FEI Number	Anathad Car	_
21		26 26		65-0633000	Applied For	_	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicat  \$8.75 Additional	ЭНӨ	
22		27		<ol><li>Certificate of Status Desired</li></ol>	Fee Required		
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00 May Be	一
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Countr	у	8. This corporation owes or has paid	the current year intangible	$\neg$
24	25	29	30		Personal Property Tax due June 3	30. Yes No	
	g. Name and Address of Curren	· · · · · · · · · · · · · · · · · · ·		1-:	10. Name and Address of New Reg	Istered Agent	$\Box$
	AZOZA, COMAS, DE TORRES &	Fernandez, Pa	81	Name			
	MADEIRA AVE.		82	Street Add	ress (P.O. Box Number is Not Acceptable	3)	一
CO	RAL GABLES FL 33134						_
			83				- 1
			84	City		85 Zip Code	一
44 Durayant	to the provious of Castings CO7 04 0	0 CO2 1500 51		<u> </u>		FL 65 Zip Code	_
office or r	egistered agent, or both, in the State.	of Florida. Such change was a	authorized b	v the corpora	poration submits this statement for the pution's board of directors. I hereby accept	rpose of changing its registere the appointment as registered	a
agent. La	m familiar with, and accept the obliga	ations of, Section 607.0505, Fi	orida Statute	S.	• •	,,	- {
SIGNATURE	Signature, typed or printed name of registered agei	of and title if number the	C Desistered As		red when reinstaling)		_
12.	OFFICERS AND		13.	eni a gnature requi	ADDITIONS/CHANGES TO OFFICE	DATE	ᅱ
TITLE	P	DELETE	1.1 TITLE		NOOTH ON ON ON ONE TO CALL	Change Addition	- d
NAME	GRANDE, MANUEL A		1.2 NAME				
STREET ADDRESS	ATTO CALL ADDITION OF THE PARTY		1.3 STREET ADORESS				[
CITY-ST-ZIP	MIAMI FL 33175		1.4 CITY -	ST-ZIP	•		-
TITLE	VP VP	DELETE	2.1 TITLE			Change Addition	iπ
NAME	GRANDE, ELIA		2.2 NAME				
STREET ADDRESS	2720 S.W. 129TH AVE		2.3 STREE	ADDRESS			-
CITY-ST-ZIP	MIAMI FL 33175		2. 4 C/TY-	ST-ZIP			
TITLE	8	☐ DELETE	3.1 TITLE			Change Addition	າຄ
NAME	GRANDE, CARLOS M		3.2 NAME				
STREET ADDRESS	1037 ALFONSO		3.3 STREE	ADDRESS			
CFTY-ST-ZIP	CORAL GABLES FL 33146		3.4. CITY -	ST-ZIP			
TITLE	Ţ	DELETE	4.1 TITLE			☐ Change ☐ Addition	'n
NAME	GRANDE, FRANK		4. 2 NAME				
STREET ADDRESS	2414 SW 8 ST		4.3 STREET	AODRESS			- 1
CITY-ST-ZIP	MIAMI FL 33135		4.4 CITY-5	T-ZIP			╛
TITLE		☐ DELETE	5.1 TITLE			Change Additio	n
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-\$T-ZIP			5.4 CITY - S	T- ZIP			╛
TITLE		DELETE	6.1 TITLE			☐ Change ☐ Additio	n
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY+S	T-ZIP			

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 truefect 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, of on an attachment with an application.