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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

27 City & State City & State 6. Election Campaign Financing 7. 28 Zip Country Zip Country 8. This corporation owes the current year Intangible Personal Property Tax. Year State 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BRAVO, BEATRIZ 2484 WEST 70TH PLACE HIALEAH FL 33016 BRAVO, BEATRIZ 2484 WEST 70TH PLACE 82 City FL 85 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 change 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 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 agent agent required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		1999						
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FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90131 049 ***150.00



Applied For Not Applicable \$8.75 Additional

□No

Fee Required

\$5.00 May Be Added to Fees

☐ Yes

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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											
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14. I hereby c	ertify that the information supplied with this filing does not qualify for the	xempt	ion	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 all 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, with all other like empowered.

SIGNATURE: