SECCIO NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000063611 (4)

STRICTLY BUSINESS CORP.

APPROVED AND FILED

1997 AUG -4 PM 2: 23

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address						i destinati tin inini ettii ma	ill Bûill Bêlit ûûlijû êl	100 1111E 81101 1101	81 (IB) 189)	
18480 SW 244TH ST 18480 SW 244TH ST										
HOMESTEAD I	FL 33 031	HOMESTEA	HOMESTEAD FL 33031			DO NO	DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Q		ate of Last Re	eport	
			•			08/16/1995	l or	3/06/1996	<i></i>	
2. Principal Pl	ace of Business	2a. Mailing	2a. Mailing Address			4. FEI Number			plied For	
21		26	26			65-0611115		No	t Applicable	
Suite, Apt.	#, etc.	Suite, A	Suite, Apt. #, etc.			5. Certificate of Status De	sired	\$8.75 A	Additional	
22		27				6. Certificate of States De.	Fee Required			
City & State			City & State			6. Election Campaign Financing \$5.00 May Be				
23		·	Zip Country			Trust Fund Contribution L. Added to Fees				
Zip	Country	Zip					8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
24		25 29 30 Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
VQI	ESIAS, DAVID			81	Name					
	80 SW 244TH ST		}							
	MESTEAD FL 33031					Address (P.O. Box Number is Not Acceptable)				
				0.4	0.7			20 70 /	Λ- al-	
				84	City		FL	85 Zip C	Jode	
11. Pursuant t	o the provisions of Sections 607.	0502 and 607.1508,	Florida Statutes,	the above	-named	corporation submits this statement	for the purpose of	of changing its	s registered	
oπice or re agent. I ar	egi stered agent, or both, in the Si In fam iliar with, and accept the ot	tate of Florida, Such oligations of, Section	change was aut 607.0505, Floric	norizea by da Statutes	r the corp i.	poration's board of directors. I here	by accept the ap	contiment as	registered	
SIGNATURE]	
Signature, typed or printed name of registered agent and title if applicable (NOTE: Ro					nt signaruro	required when reinstating)	DATE			
12.	OFFICERS	AND DIRECTORS	DOLLETE	13.		ADDITIONS/CHANGES 1	O OFFICERS AN			
TITLE	YGLESIAS, DAVID	L	☐ DELETE	11 INLE		90000	nooma	Change	Addition	
NAME	18480 SW 244TH ST		1.2 NAME 1.3 STREET ADDRESS		-ns	/12/970	U0640	107		
STREET ADDRESS	HOMESTEAD FL 33031					**	**165.00	****16	ŝion l	
CITY-ST-ZIP TITLE	TIGHILLOTE OF TE GOOD!		DELETE	1.4 CITY-S 2.1 THILE	1-211			Change	Addition	
NAME		•		2.2 NAME			S 1.9	onange	L.J (Islandin	
STREET ADDRESS				2.3 STREET	4DDRESS					
OFY-ST-ZIP		•		2. 4 CITY - S						
TILE	_ 		DELETE	3.1 TITLE	···			Change	Addition	
NAME .				3.2 NAME					ŀ	
STREET ADDRESS				3 3 STREET	ADDRESS					
CITY-ST-ZIP				3 4. CITY - S	ST - ZIP					
TITLE			DELETE	4.1 TITLE				Change	Addition	
NAME				4. 2 NAME						
STREET ADDRESS				4.3 STREET	ADDRESS				Ì	
CITY-ST-ZIP				4.4 CITY - S	T - ZIP					
TITLE			DELFTE	5.1 TITLE				Change	Addition	
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREET	ADDRESS					
CITY-ST-ZIP				5.4 CITY - S	T-ZIP					
TITLE			DELETE	6.1 TITLE				☐ Change	☐ Addition	
NAME				6.2 NAME						
STREET ADDRESS				6.3 STREET	ADDRESS	A .				
CITY-ST-ZIP				64 CITY-S	1-ZIP	SCC 8-4-97				

14. Ide 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 eath; 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.

2AC 47x 133/

RE Strictly Business Corp.

To Whom it May Goncern:

E-Mail to you last week recarding this 2nd notice. We aid not receive the sold not receive the your sent it in hight own not to pay the late fee.

own not to pay the late after has any questions please fell free to Coll my number listed on the Enclosed document.

Shank you. Carrie yelesias