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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # P9500066907 (3)

OMNIBUS ALIADOS CORPORATION

Principal Place of Business Mailing Address					. I Intiitet if iaint aitti attit Catit sain	· BBITT BILLS BILLS IN IT OF	III 199) (P91	
1261 SAW MI CORAL GABL US		1261 SAW MIGUEL AVE CORAL GABLES FL 33134 US		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualified 08/28/1995			
2. Principal Place of Business Suite, Apt #, etc City & State		2a. Mailing Address 26			4. FEI Number 65-0665148		oplied For ot Applicable	
		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Addition Fee Required 6. Etection Campaign Financing Trust Fund Contribution Added to Feet			
		City & State						
Zip 4	Country 25	Zip.	Count	У	This corporation owes or has paid Personal Property Tax due June 3		tangible No	
	g. Name and Address of Curren	t Registered Agent			10. Name and Address of New Reg	istered Agent		
RO	DRIGUEZ, MERCEDES		8	Name				
1261 SAN MIGUEL AVENUE CORAL GABLES FL 33134			6:	Street Ac	Address (P.O. Box Number is Not Acceptable)			
00	THE GADLES IE 33104		8:	3				
			84	City		85 Zip 0	Code	
			"	· Only		FL °	0000	
SIGNATURE 12.	Stignflure, typied or plinted name of trig de PS age OF LICERS AND	nikyciąłys	NOTE Registered A	gent signature re	quired when (einstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECTOR	IS IN 12	
TITLE	VP	DELETE	1.1 TITLE			☐ Change	Addition	
NAME	GONZALEZ, ALBERTO		1.2 NAME	Ī				
STREET ADDRESS	1261 SAN MIGUEL AVE		1.3 STREE	T ADDRESS				
CITY - ST - ZIP	CORAL GABLES FL	Literat	1.4 CITY-	ST-ZIP			1 4 2 2 2 2 2 2	
TITLE	VSD Gonzalez, Alberto	DELETE	2 1 TITLE 2 2 NAME	\		☐ Change	Addition	
NAME STREET ADDRESS	1281 SAN MIGUEL AVENUE			T ADDRESS				
CHY-ST-ZIP	CORAL GABLES FL 33134		2.4 CITY	1				
TITLE		DILITE	3.1 TITLE	<u> </u>	· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS			33 STREE	T ADDRESS				
CITY-ST-ZIP			3 4. CITY	ST-ZIP				
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STREET ADDRESS				1 ADDRESS				
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TITLE		DELFTE	61 TITLE	V. F"	TAM - 1	Change	Addition	
		====		1		•		

4. Thereby 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 rue 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 trusted 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 or an attachment with an address

SIGNATURE:

STREET ADDRESS

Vereeles Kodrigues

Feb. 23, 1998 446

FILED

Mar 02 1998 8:00am

Secretary of State

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(305) 446-3100