Not Applicable \$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

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

2a. Mailing Address

City & State

Zip

27

Suite, Apt. #, etc.

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000068430

Country

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

23

VILALTA INVESTMENTS, CORP.

Principal Place of Business	Mailing Address
3761 SW 139 PLACE	3761 SW 139 PLACE
MIAMI FL 33175	MIAMI FL 33175

May 04, 1999 8:00 am Secretary of State

05-04-1999 90201 027 ***150.00

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	DO NOT WRITE IN THIS SPACE
3.	Date Incorporated or Qualifed
	09/06/1995
	EEL Number

П

65-0615987

5. Certificate of Status Desired

Trust Fund Contribution

Election Campaign Financing

8. This corporation owes the current year intangible

24		25		29	;	30		_			roperty Tax.		tres		
		9. Name and	Address of C	urrent Registered	Agent				10	Name and	Address of	New Regis	tered Afgent		
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	MIAM	l FL 33175				į	83								ļ
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				1000	5 Fl. () St. ()		84	City	mi	AM	e etatamant f	or the nurry	FL 85	23	175
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.															
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Site	HAIONE	Signature, typed or pro-	inted name of registe	ered agent and title if applical	ble. (NOTE:	Registered	Agent	signature re	equired when			D.	ATE	· 	
12.			OFFICE	RS AND DIRECTOR		13.				ADDITIONS	CHANGES 1	O OFFICE	RS AND DIRE		RS IN 12 Addition
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	1 6	- wife , Ale and Ale a lim	formation num	lied with this tiling de	are Not qualify for	the eve	mnti	on states	Lin Section	on 119 07(3)(i) Florida Sta	tutes. I furt	ber certify that	the in	formation

Country

Interest certally that the information supplied with this wing does not quality for the exemption stated in Section 1.5.07(5)(f), I foliad Statetes: Interest certally state and indicated on this annual report or supplemental annual report, strue 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 of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; that I am an officer or director of the same legal effect as if made under oath; that I am an officer of the same legal effect as if made under oath; that I am an officer of the s

SIGNATURE:

SIGNATE REQUIRE RATIONAL TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR