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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	MENT # P9500(ITERPRISE, INC.	0069236 (4)					
Principal Place of Business Mailing Addres			ss .				AU 40414 (100 0 1)	
4658 SW 74 AVE MIAMI FL 33155		4658 SW 74 AVE MIAMI FL 33155				DO NOT WRITE IN THIS	SPACE	
		,				3. Date Incorporated or Qualified		
2. Principal Place of Business		2a. Mailing Address				08/29/1995 4. FEI Number	— IA	pplied For
<u>=</u> អ]		26				65-0605648		lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
City & State		City & State						lequired
23	;	28				6. Election Campaign Financing Trust Fund Contribution		May Be I to Fees
Zip	Country	Zibi	Coi	untry		8. This corporation owes or has paid the cu		
24	25	29	30			Personal Property Tax due June 30.		☐ No
	g. Name and Address of Curren	t Registered Agent		<u> </u>		10. Name and Address of New Registered	Agent	
NATSUI, EDWARD C				81	Vame			
	12 SW 104 ST #2414				Street Addr	ress (P.O. Box Number is Not Acceptable)		
MIA	MI FL 33196			83				
				63				
•				84 (City	FL	85 Zip	Code
SIGNATURE	Signature, typical or profited name of registers diago	it and the if applicable (N		ed Agent s		poration submits this statement for the purpose ition's board of directors. I hereby accept the apparent when renstating). DATE ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	DP	DELETE	1.1 7		<u>-</u>	ADDITIONS/CHANGES TO OTT ICENS AN	Change	Addition
NAME	NATSUI, EDWARD C		f	NAME			_ •	•=
STREET ADDRESS	15012 S.W. 104 ST,#2414		1.3 S	STREET AD	DRESS			
CITY+ST-ZIP	MIAMI FL		1.4 0	CITY-S1-Z	7(P			
TITLE		☐ DELETE	2.1 1	HTLE			Change	Addition
NAME			2.2 N	VAME	ļ			
STREET ADDRESS				STREET AD	1			
CITY-ST-ZIP	<u> </u>	DE LETE		CITY-ST-	ZIP		Change	Addition
NAME .			3.1 T 3.2 N				Change	TT VOOIDOU
STREET ADDRESS				vani Street Ad	DRESS			
CITY-ST-ZIP				CHY-SI				
TITLE		DELETE	4.1 T				Change	Addition
NAME			4.21	NAME				
STREET ADDRESS			4.3 S	STREET AD	DRESS			
CITY-ST-ZIP			4.4.0	11Y - ST - Z	up			
TITLE		☐ DELETE	51 T	ITLE			Change	Addition
NAME			5.2 N	NAME.				
STREET ADDRESS			5.3 S	STREET AD	DRESS			
CITY-ST-ZIP		The second		CITY-ST-Z	'IP			- 1 a a a a a
TITLE		DELETE	617	HLE	1		Change	Addition

14. Thereby certify that the information supplied with this filling 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 of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attractional with an address

6.3 STREET ADDRESS

NAME

STREET ADDRESS

FILED

Apr 13 1998 8:00am

Secretary of State