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

POCUMENT # P95000071779 (9)

Principal Place of Business

Mailing Address

10411 S.W. 41ST STREET
MIAMI FL 33165

DO NOT WRIT

3. Date Incorporated or Qualified
09/18/1995

2. Principal Place of Business

26. Mailing Address

27. Suite, Apt. #, etc.

27. City & State

City & State

City & State

Mailing Address

Mailing Address

Louis Address

4. FEI Number
59-3334447

6. Certificate of Status Desired

FILED Mar 02 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

| | | | | | 09/18/1995 | |
|---|--|-------------------------------------|---------------|---|---|-------------------------|
| 2. Principal P | 28. Mailing Address | ng Address | | 4. FEI Number | Applied For | |
| 21 | 1 | | | | 59-3334447 | Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | \$8.75 Additional |
| 22 | | 27 | | | Certificate of Status Desired | Fee Required |
| City & State | | City & State | | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 28 | | 28 | 8 | | Trust Fund Contribution | Added to Fees |
| Zip | Country Zip | | Cour | ntry | 8. This corporation owes or has paid the curre | nt year Intangible |
| 24 | 25 | 29 | 30 | | Personal Property Tax due June 30. Yes No | |
| | 9. Name and Address of Curren | t Registered Agent | | | 10. Name and Address of New Registered Ag | ent |
| ROSAL, CONCEPCION | | | | B1 Name | | |
| 10411 S.W. 41ST STREET MIAMI FL 33165 | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | |
| | | | | | | |
| | | | [7 | 83 | | |
| | | | <u> </u> | D.A. Other | | 2 - Cada |
| | | | ' | B4 City | FL | 85 Zip Code |
| | | | | | | |
| 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 registured ager | nt and title if applicable (NOT | E: Registered | Agent signature | required when reinstating) DATE | |
| 12. | OFFICERS AND DIRECTORS 1 | | 13. | | ADDITIONS/CHANGES TO OFFICERS AND D | DIRECTORS IN 12 |
| TITLE | PD DELETE 1 | | 1.1 TITL | £ | | Change Addition |
| NAME | ROSAL, CONCEPCION | | 1.2 NAM | ME | | |
| STREET ADDRESS | % 10411 S.W. 41ST STREET | | 1.3 STR | EET ADDRESS | | |
| CITY-ST-ZIP | MIAMI FL | | 14 G(T) | -ST-ZIP | | 1 |
| TITLE | PD DELETE | | 2.1 TITL | | | Change Addition |
| NAME | GARCIA, ENRIQUE | | 2.2 NAM | AE | | |
| STREET ADDRESS | CARACTE ARABIT AT HAVE | | 2.3 STR | EET ADDRESS | | |
| CITY-ST-ZIP | AVENTURA FL 33180 | | | Y-ST-ZIP | | |
| TITLE | | DELETE | 3.1 7(7) | | | Change |
| NAME | | | 3.2 NAM | Æ | | - |
| STREET ADDRESS | DRESS | | | 3.3 STREET ADDRESS | | |
| CITY+ST-ZIP | | | | Y-ST-Z#P | | |
| TITLE | Tell and the second sec | | 4.1 TITL | | T. | Change Addition |
| NAME | | | 4. 2 NA | | · - | • • |
| STREET ADDRESS | | | | EET ADDRESS | | |
| CITY-ST-ZIP | • | | | (-ST-ZIP | | [|
| TITLE | | | 5.1 T(T) | | | Change Addition |
| NAME | - | | 5.2 NAN | | _ | - , — |
| STREET ADDRESS | | | | eet address | | |
| | | | | -ST-ZIP | | |
| CITY-ST-ZIP TITLE | | | 6.1 TITL | | | Change Addition |
| NAME | | | 6.2 NAN | | | |
| := | | | | | | |
| STREET ADDRESS | | | | EET ADDRESS | | |
| CITY-ST-ZIP | portify that the information supplied with | th this filing does not qualify for | | r-ST-ZIP | and in Section 119 07/3/(i) Florida Statutes I further certif | hu that the information |

In nereby 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 oath; that I am an officer or director of the copyrights from the receiver or the employment to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if clying in, or on an attaching with an address.

SIGNATURE

musel fral

Elman 19, 1998