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

DOCUMENT #

P95000076953 (5)

LIJO INC

Principal Plac	ce of Business	Mailing Address	<u> </u>						
15162 SW 92 TER 15162 SW 92 TER									
MIAMI FL 33186 MIAMI FL 33186			=	=		DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified	IN THIS S	SFAUE	
						10/02/1995			
2. Principal I	Place of Business	2a. Mailing Address	i.			4. FEI Number			Applied For
21		26				65-0611535		_	lot Applicable
Suite, Apt	. #, etc.	Suite, Apt. #, etc.	-			1		\$8.75	Additional
22		27				5. Certificate of Status Desired	<u></u>	Fee F	Required
City & Sta	te	City & State	±.			6. Election Campaign Financing			О Мау Ве
Zip	Country	Zip	Count	n,			<u> </u>		i to Fees
24	25	29	30	ı y		 This corporation owes or has paid Personal Property Tax due June 3 	_		ntangible No
12-7	9. Name and Address of Curr		1301	-		10. Name and Address of New Regi			
KΔ	VADAS, LISA		8	1 Nan	ne				
1	162 SW 92 TER		8	2 Stro	ot Addro	ss (P.O. Box Number Is Not Acceptable			
	AMI FL 33186		ľ	2 346	et Addie	ss (P.O. Box Number is Not Acceptable	<i>?)</i>		
			8	3					
			8	4 City					Codo
			-	1			FL	1 1 '	Code
SIGNATURE	Signature, typed or printed name of registered		NOTE: Registered A			ration submits this statement for the pur n's board of directors. I hereby accept when reinstating)	DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	RS AND	DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1,1 TITLE		İ		į	Change	☐ Addition
NAME	KAVADAS, LISA		1.2 NAM	•					
STREET ADDRESS	15162 SW 92 TER			ET ADDRES	s				
CITY-ST-ZIP TITLE	MIAMI FL 33186	DELETE	1.4 CITY-		_ -			l o	
NAME	D CHANEY IOUN	☐ DETEIE	2.1 TITLE					Change	Addition
STREET ADDRESS	CHANEY, JOHN 15162 SW 92 TER		2.2 NAM		. ا				
CITY-ST-ZIP	MIAMI FL 33186		2.3 STRE	T ADDRES	۱"				
TITLE	VP	☐ DELETE	3.1 TITLE					Change	Addition.
NAME	GREEN, NOEL		3.2 NAME	!			•	_	
STREET ADDRESS	1821 SW 124TH WAY		3.3 STREE	T ADDRES	s				
CITY-ST-ZIP	MIRAMAR FL		3.4. CITY						
TITLE		☐ DELETE	4.1 TITLE					Change	☐ Addition
NAME			4. 2 NAM	Ē	1				
STREET ADDRESS			4.3 STREE	T ADDRES	s				
CITY-ST-ZIP			4,4 CITY-	ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE					Change	☐ Addition
NAME			5.2 NAME						
STREET ADDRESS				T ADDRES	S				
CITY - ST - ZIP			5.4 CITY-	ST-71P	1				1

14. I 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 oath; 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

CANDINE PECAUPO

DELETE

15/97 (35)380-6401

FILED

Jan 20 1998 8:00am

Secretary of State

HZE034 (10/97)