

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

FILED  
Mar 19 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000078385 (8)

1. Corporation Name

MASF ENTERPRISES, INC.



Principal Place of Business

Mailing Address

7370 NW 36TH STREET  
415B  
MIAMI FL 33166

15108 S.W. 104TH STREET #718  
MIAMI FL 33196-3281

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/12/1995

4. FEI Number

65-0816150

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 14972SW 104st

26 14972SW 104st

Suite, Apt (#), etc.

Suite, Apt (#), etc.

22 104

27 104

City & State

City & State

23 MIAMI - FL

28 MIAMI - FL

Zip

Zip

Country

Country

24 33196

25 U.S.A

29 33196

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SILVA, ZAIDA B  
15108 S.W. 104TH STREET #718  
MIAMI FL 33196

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

14972SW 104st Unit 104

83

84 City MIAMI

FL

85 Zip Code 33196

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 Zaida Silva "President"

03-12-98

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME SILVA, ZAIDA B  
STREET ADDRESS 7370 NW 36TH STREET SUITE 415-B  
CITY-ST-ZIP MIAMI FL 33166

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VST ☐ DELETE

NAME SILVA, JORGE E  
STREET ADDRESS 7370 NW 36TH STREET SUITE 415-B  
CITY-ST-ZIP MIAMI FL 33166

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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.

SIGNATURE: Zaida Silva

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-03/19/98--01062--012  
\*\*\*150.00

CR2E034 (10/97)