


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

FILED

**Mar 09 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 # P95000083033 (7)
 1. Corporation Name
DIBUONO INVESTMENT, INC.



| | |
|--|--|
| Principal Place of Business 11795 SOUTH WEST 14TH TERRACE MIAMI FL 33184 | Mailing Address 11795 SOUTH WEST 14TH TERRACE MIAMI FL 33184 |
|--|--|

DO NOT WRITE IN THIS SPACE

| | | | | | |
|--|--|---|--|---|--|
| 2. Principal Place of Business 21 11744 SOUTH WEST Suite, Apt. #, etc. 22 14 TERRACE City & State 23 MIAMI FLORIDA Zip 24 33184 | | 2a. Mailing Address 26 11744 SOUTH WEST Suite, Apt. #, etc. 27 14 TERRACE City & State 28 MIAMI FLORIDA Zip 29 33184 | | 3. Date Incorporated or Qualified 10/25/1995 | |
| 4. FEI Number 65-0630565 | | Applied For <input type="checkbox"/> Not Applicable | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | | 7. \$5.00 May Be Added to Fees | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

| | | | | | | | |
|---|--|---|--|--|--|--|--|
| 9. Name and Address of Current Registered Agent DIBUONO, JESUS 11795 SOUTH WEST 14TH TERRACE MIAMI FL 33184 | | | | 10. Name and Address of New Registered Agent | | | |
| 81 Name DIBUONO, JESUS | | 82 Street Address (P.O. Box Number is Not Acceptable) 11744 SOUTH WEST 14 TERRACE | | 83 | | 84 City MIAMI FL 85 Zip Code 33184 | |

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 *Jesús A. Dibuno* (NOTE: Registered Agent signature required when reinstating) DATE _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---|---|---|
| TITLE | DPS <input type="checkbox"/> DELETE | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | DIBUONO, JESUS | 1.2 NAME | |
| STREET ADDRESS | 11795 SOUTH WEST 14TH TERRACE | 1.3 STREET ADDRESS | 11744 SOUTH WEST 14 TERRACE |
| CITY-ST-ZIP | MIAMI FL | 1.4 CITY-ST-ZIP | MIAMI FL - 33184 |
| TITLE | DVPT <input type="checkbox"/> DELETE | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | DIBUONO, CARIDAD | 2.2 NAME | |
| STREET ADDRESS | 11795 SOUTH WEST 14TH TERRACE | 2.3 STREET ADDRESS | 11744 SOUTH WEST 14 TERRACE |
| CITY-ST-ZIP | MIAMI FL | 2.4 CITY-ST-ZIP | MIAMI FL - 33184 |
| TITLE | <input type="checkbox"/> DELETE | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

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: *Jesús A. Dibuno* **03-02-98**

CR2E034 (10/97)