Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90042 014 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000083522

1. Corporation Name

DIDI AN REOTHERS ALITO RODY SHOP INC

DII LAN	DHOTTENO ACTO DODT OF	1101,	1140	_									
Principal Place	e of Business	M	ailing Address					I (#Bildåt tan 1846) Etter Markt ma					
246 N.W. 54TH ST. MIAMI FL 246 N.W. 54TH ST. MIAMI FL								. DO NOT WRI	TE IN TUIC	CDACE			
							_	Date Incorporated or Qualifed	IE IN I HIS	SPACE			
							3.	11/01/1995				. [
S Daineiral Di	loca of Business	20	Mailing Address					FEI Number		-т	Anni	ied For	
-i ''								65-0626476			Not Applicable		
26 Suite, Apt. #, etc. Suite, Apt. #, etc.							_ \$			\$8.7	8.75 Additional		
22 27 27				.5			5.	Certifcate of Status Desired		,	e Req		
City & State City & State								Election Campaign Financing	· - · - · - · - · - · - · - · · · · · ·	\$5.	00 N	lay Be	
23		28		_				Trust Fund Contribution			led to		
Zip	Country		Zip	Country	,		8.	This corporation owes the curr	ent year Inta		_	_	
24	25	29	30)				Personal Property Tax.		Yes	L	No_	
	9. Name and Address of Curren	t Regis	tered Agent		_		<u>10.</u>	Name and Address of New F	Registered /	Agent			
0.00	MONEO WACHINOTON M			81		Name							
QUINONES, WASHINGTON M					82 Street Add			O. Box Number is Not Accepta	able)	,			
1840 WEST 49TH ST. SUITE 601					L								
				83								}	
חאנר	EAH FL 33012			84	T	City	_		FL	85	Zip Co	ode	
agent. I a	to the provisions of Sections 607 Solds registered agent, or both, in the State im familiar with, and accept the obligat Signature, typed or printed name of registered agen	tions of	, Section 607.0505, Florid if applicable. (NOTE. Re	a Statutes	i.	signatura required v	when n	einstating)	DATE				
12.	OFFICERS AN	D DIRE	DELETÉ	13.	_			ADDITIONS/CHANGES TO OF	FICERS AN	Cha		Addition	
TITLE	PTD TANKE OF TANKS D		□ nereit	1.1 TITLE						ــــ حــــ		(
NAME	DIPLAN-TOLENTINO, TANYA R			1.2 NAME 1.3 STREET		ADDRESS.							
STREET ADDRESS	3350 E. 4TH AVE. APT. A6 HIALEAH FL											,	
CITY-ST-ZIP TITLE	SD		☐ DELETE	1.4 CITY-S 2.1 TITLE	1-4	ZIP		-		Cha	nge	Addition	
	TOLENTINO, MARLINE M			2.2 NAME						_	·		
NAME	3350 E. 4TH AVE. APT. A6			2.3 STREET	ТΔ	VDUBESS							
STREET ADDRESS	HIALEAH FL			2.3 STREE		1						ŀ	
CITY-ST-ZIP TITLE	INCLEMENT		☐ DELETE	3.1 TITLE	-,-					Cha	nge	Addition	
NAME				3.2 NAME									
STREET ADDRESS				3.3 STREE	TΑ	ADDRESS							
CITY-ST-ZIP				3.4. CITY-5	3T-	- ZIP							
TITLE			☐ DELETE	4.1 TITLE						Cha	nge	☐ Addition	
NAME				4. 2 NAME									
STREET ADDRESS				4.3 STREE	ŤΑ	ADDRESS						!	
CITY-ST-ZIP				4.4 CITY-S	T-2	ZIP							
TITLE			☐ DELETE	5.1 TITLE					4	☐ Cha	nge	Addition	
NAME				52 NAME								I	
STREET ADDRESS				5.3 STREE									
CITY-ST-ZIP				5.4 CITY-S	1-	ZIP				<u></u>			
TITLE			☐ DELETE	6.1 TITLE		ļ				Cha	nge	☐ Addition	
NAME	I			6.2 NAME									

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 adjust, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP