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 # P95000084684 (6)

C.L.S.L. DEVELOPERS, INC.

Principal Place of Business Mailing Address 11024 SW 51ST TERR. 11024 SW 51ST TERR. MIAMI FL 33165 MIAMI FL 33165 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/03/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0626723 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MARTINEZ, CARLOS 11024 SW 51 TERR 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33165** 83 84 Zip Code 85 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typical or printing masse of responsed riginal and title disapple able (NOTE Hugistered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. TITLE DELETE 1.1 TITLE Change MARTINEZ, CARLOS 12 NAME NAME 11024 SW 51 TERR STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33165** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 2.1 TITLE MARTINEZ, SOFIA 22 NAME NAME 11024 SW 51 TERR STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33165** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Addition TITLE 31 TITLE MARTINEZ, LAZARA NAME 3.2 NAME 11024 SW 51 TERR 3.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33165** 34. CITY-ST-ZIP CITY-ST-ZIP DELETE 41 TITLE Change Addition NAME PEREZ, LAURIE 4. 2 NAME 11024 SW 51 TERR STREET ADORESS 43 STREET ADDRESS **MIAMI FL 33165** 44 CITY-ST-ZIP CITY-ST-ZIP DELETE 5 1 TITLE Change ☐ Addition TITLE NAME 52 NAME

of qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. Thereby certify that the information supplied wi indicated on this aroust report or supplemental

5 3 STREET ADDRESS

63 STREET ADDRESS

5 4 CITY - ST - ZIP

61 TITLE

62 NAME

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Change

Addition

FILED

Feb 17 1998 8:00am

Secretary of State