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

PROFIT CORPORATION **ANNUAL REPORT**

1998



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000087751 (0)

CELEBRATION INVESTMENTS, INC.

Mailing Address	
601 BRICKELL KEY DRIVE SUITE 805	
	601 BRICKELL KEY DRIVE

FILED May 15 1998 8:00am Secretary of State



Principal Place		Mading Address			
901 BRICKELI	L KEY DRIVE	601 BRICKELL KEY DRIVE			
SUITE 805 MIAMI FL 33131		SUITE 805 31 MIAMI FL 33131		DO NOT WRITE I	N THIS SPACE
	•			3. Date Incorporated or Qualified	
				11/15/1995	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
	backell key Deive	26 601 Brickell	Key Drivi	€ 65-0738714	Not Applicable
Sulte, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		27 705 City & State			Fee Required
	im. Fl	28 MiAMI	工	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	This corporation owes or has paid	
24 331	L '		30 ÚSA	Personal Property Tax due June 3	
	9. Name and Address of Curren		7	10. Name and Address of New Reg	
ALI	LEN & GALEGO		81 Name	La Cona Milloniana	1 3
	1 BRICKELL KEY DRIVE		82 Street A	Address (P.O. Box Number is Not Acceptable	& BAJANDAS LLA
	ITE 805		1001°	BUCKEN KEY DEIVE	"
	AMI FL 33131		83	· ·	
			84 City	TEL 705	85 Zip Code
			The	IMA	FL 33181
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	s, the above-named of	corporation submits this statement for the puriod or statement for the puriod of directors. I hereby accept	rpose of changing its registered
agent la	m familiar with, and accept the obliga	ations of, Section 607.0505, Flor	ida Statutes.	oralions board of directors. Thereby accept	the appointment as registered
SIGNATURE		RICARDO	Baianda	OS GEN'L PTR equired when reinstating)	4129198
<u> </u>	Signature, typed or printed name of registered age				DATE DIPEOTODO IN 10
12.	OFFICERS AND	DELETE DELETE	13.	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	GOMEZ, LORENA	C) pittit	1.2 NAME		C) change C) radiion
STREET ADDRESS	7255 NORTH OAKMONT DRIV	<i>I</i> E	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33015	1L	1.4 CITY - ST - ZIP		
TITLE	AS	DELETE	2.1 TiTLE	5	Change Addition
NAME	ALLEN, ROBERT N JR	\dot{M}	2 2 NAME	RICANDO BASANDAS	, , ,
STREET ADDRESS	601 BRICKELL KEY DRIVE S	SUITE 805		601 Bricket Key Deir	# 4105
CfTY-ST-ZIP	MIAMI FL 33131		2.4 City-St-ZiP	MIAMI FL 3318	
TITLE	1	DELETE	3 1 11TLF		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-S1-ZIP		
TITLE		DELETE	4.1 TOLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		T believe	4.4 C(TY - ST - Z)P		Observe Daday
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS]
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
TITLE					C Augusta C Modillosi
NAME CTOCET ADDRESS			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	partify that the informative currylind us	th this filing does not qualify for	6.4 CiTY-ST-ZIP	h in Section 119 07(3)(i) Florida Statutes I fo	other certify that the information

I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the informatic indicated on this annual report or supplicemental 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