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

DOCUMENT #

P95000096983 (8)

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9. Name and Address of Current Registered Agent

SUJEY INC.

Principal	Place	of	Business
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2. Principal Place of Business

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CORONADO, NESTOR

Sulte, Apt. #, etc.

SIGNATURE:

GREAMA

City & State

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23

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Zip

Mailing Address

18650 SW 122 AVE MIAMI FL 33177 18650 SW 122 AVE MIAMI FL 33177

2a. Mailing Address

City & State

Suite, Apt #, etc.

FILED May 14 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Yes

Not Applicable

 Date Incorporated or Qualified 12/26/1995

65-0632377

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

4. FEI Number

7360 CORAL WAY, SUITE 21 MIAMI FL 33155			82	82 Street Address (P.O. Box Number is Not Acceptable)						
MN	-MI FL 33133		83	1						
			_							
			84	City	FL	85 Zip C	Code			
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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE										
12.	Signature, typed or printed name of registered agent and title if applicab	e (NOTE: Re		ent signatu	ure required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND	DIDECTOR	2)), 10			
TITLE	OFFICERS AND DIRECTORS	DELETE	13.			Change	Addition			
	• -	☐ DECEIL			· }.	Change	L Addition			
NAME	CAMEJO, MARTHA J		1.2 NAME							
STREET ADDRESS	18650 SW 122 AVE		1.3 STREE	T ADDRESS	S					
CITY-ST-ZIP	MIAMI FL 33177		1.4 CITY-	ST-ZIP						
TITLE	VD	DELETE	2.1 TITLE		1	Change	Addition			
NAME	LOPEZ, ADOLFO J		2.2 NAME							
STREET ADDRESS	18650 SW 122 AVE	j	2.3 STREE	T ADDRESS	s]		J			
CITY-ST-ZIP	MIAMI FL 33177		2. 4 CITY -	ST-ZIP						
TITLE	\$ D	☐ DELETE	3.1 TITLE		ļ	Change	☐ Addition			
NAME	CAMEJO, MARTHA J		32 NAME				!			
STREET ADDRESS	18650 SW 122 AVE		3.3 STREE	1 ADDRESS	s					
CITY-ST-ZIP	MIAMI FL 33177		3.4. CITY-	ST-ZIP						
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition			
NAME			4. 2 NAME		1		i			
STREET ADDRESS			4.3 STREE	T ADDRESS	S					
CITY-ST-ZIP			4.4 CITY-	ST - ZIP						
TITLE		☐ DELETE	5.1 TITLE			Change	Addition			
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREE	T ADDRESS	s		İ			
CITY-ST-ZIP			5.4 CITY-1	ST-ZIP						
TITLE		DELETE	6.1 TITLE			Change	Addition			
NAME			6.2 NAME							
STREET ADDRESS		J	6.3 STREE	T ADDRESS	s					
CITY-ST-ZIP			6.4 CITY-	ST-ZIP						
14. Thereby certify that the information supplied with this tiling 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 approach is true and accurate and that my signature shall have the same legal effect as if made under oath; that I arm an officer or director of the corporation or the receipt or or the state of the corporation or the receipt or or the state of th										

Country

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