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

28

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**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** # P9600005997 (7)

FLAMINGO HOME IMPROVEMENT, CORP

Principal Place of Business Mailing Address 2038 NW 2ND STREET 2038 NW 2ND STREET MIAMI FL 33125 MIAMI FL 33125 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/19/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0638675 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be

24 25 9. Name and Address of Current Registered Agent VELUNZA, WILFREDO 2038 NW 2ND STREET **MIAMI FL 33125** 

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Zip

	Trust Fund Contribution Added to Fees				
ountry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	3			
T	10. Name and Address of New Registered Agent				
61	Name				
B2	Street Address (P.O. Box Number is Not Acceptable)				
83					
84	City E1 85 Zip Code				

FILED

Apr 07 1998 8:00am

Secretary of State

11. Pursuant to the provisions of Sections 607.05.02 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 Signature, typed or printed name of registered agent and titled apply able (NOTE: Registered Agent signature required when reinstating)  DATE  On The Proposer of Agent Signature required when reinstating)						
12.	OFFICERS AND DIRI CTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P DELETE.	1.1 TITLE	Change Addition			
NAME	VELUNZA, BLANCA	1.2 NAME				
STREET ADDRESS	2038 NW 2ND STREET	1.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP				
TITLE	☐ DELFTE	21 TITLE	Change Addition			
NAME		2.2 NAME				
STREET ADDRESS		2 3 STREET ADDRESS				
CITY-ST-ZIP		2. 4 City-St-ZiP				
TITLE	DILETE	31 TITLE	☐ Change ☐ Addition			
NAME		3.2 NAME				
STREET ADDRESS		3.3 STREET ADDRESS				
CITY-ST-ZIP		3.4 CITY-ST-ZIP				
TITLE	DELETE	4.1 TITLE	Change Addition			
NAME		4. 2 NAME				
STREET ADDRESS		4.3 STREET ADDRESS				
CITY-ST-ZIP		4.4 CITY - ST - ZIP				
TITLE	☐ DELETE	5.1 TITLE	Change Addition			
NAME		5.2 NAME				
STREET ADDRESS		5.3 STREET ADDRESS				
CITY-ST-ZIP		5.4 CITY-ST-ZIP				
TITLE	DELETE	6.1 TITLE	Change Addition			
NAME		6.2 NAME				
STREET ADDRESS		6.3 STREET ADDRESS				

CITY-ST-ZIP 14. Thereby 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 eath, 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:

ONLY 1990 (301) 6310249

SIGNATURE: