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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600006541 (2)

ENRIQUE H. SANCHEZ, INC.

FILED May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 4345 S.W. 152 AVENUE MRAMAR FL 33027 4345 S.W. 152 AVENUE MIRAMAR FL 33027 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/22/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0650464 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible 24 29 30 Yes 25 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SANCHEZ, ENRIQUE H 4345 S.W. 152 AVENUE Street Address (P.O. Box Number is Not Acceptable) MIRAMAR FL 33027 Zip 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1 1 TITLE TITLE SANCHEZ, ENRIQUE H NAME 1.2 NAME 4345 S.W. 152 AVENUE STREET ADDRESS 1.3 STREET ADDRESS MIRAMAR FL 33027 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADORESS CITY - ST - ZWP 3.4. CITY-ST-ZIP DELETE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS City-St-29 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE ■ Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 14. I hereby certify that the information supplindicated on this annual report or suppler officer or director of the corporation or the Block 12 or Block 13 if changed, or on. loos not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an tee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

4-27-98