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 # P96000013291 (5)

DONKO ENTERPRISE OF MIAMI, INC.

FILED Feb 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						1111 25101 11925 11	110 11010 1010	P) 1/4/ 1/4/	
777 N.W.72ND AVE. #2984 MIAMI FL 33126		777 N.W.72ND AVE. #2884 MIAMI FL 33126		DO NOT WRITI	E IN THIS SP/	ACE			
miran (C 00)		WINNER I C SOIES			3. Date Incorporated or Qualified				
					02/12/1996				
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number		Ap	plied For	
21		26	◆		65-0642115		Not Applicable		
Suite, Apt #, etc		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	;	\$8.75 Additional Fee Required		
City & State		City & State	City & State		6. Election Campaign Financing	_	\$5.00		
23		28			Trust Fund Contribution		Added to		
Žip	Country	Zip	Country		8. This corporation owes or has p	· · · · · ·		angible] No	
24	25 9. Name and Address of Curr	29	30		Personal Property Tax due June 10. Name and Address of New Re			J NO	
		ant Hedisteren waart	81	Name	10, Hame and Address of New A	Statelen vô	9711		
KO, DON									
	' NW 72ND AVE #2884 IMI FL 33126		62	Street Add	iress (P.O. Box Number is Not Accepta	ble)			
WIL	WII FL 33120		83					·	
					1821				
			64	City		FL ^l	85 Zip (Code	
SIGNATURE					poration submits this statement for the tion's board of directors. I hereby acce	0/1	anging its	s registered registered	
	Signature, typod or printed name of the fund a	ND DIRECTORS		int signature requ	ired when reinstaling) ADDITIONS/CHANGES TO OFFI	DATE /	IDECTOR	C IN 10	
12.	PSD	DELETE	13.		ADDITIONS/CHANGES TO OFFI		Change	Addition	
NAME	KO, DON	La becer	1.2 NAME			_			
STREET ADDRESS 777 N.W.72ND AVE. #2884			1.3 STREET ADDRESS						
CITY-ST-ZIP MIAMI FL 33126			1.4 CITY-ST-ZIP						
TITLE	Marin I E GOILG	DELETE	2.1 TITLE	1-211	# 14 · 14 · 14 · 14 · 14 · 14 · 14 · 14		Change	Addition	
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREET	ADORESS					
CITY-ST-ZIP			2. 4 CITY -	ST - ZIP					
TITLE	DELETE		3.1 TOTLE				Change	Addition	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET	ADDRESS					
CITY-ST-ZIP			3.4. CITY - 5	ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE			L] Change	Addition	
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET	ADDRESS					
CITY-ST-ZIP		El estere	4.4 CITY - S	T-ZIP			1 05	Addition	
TITLE		☐ DELETE	5.1 TITLE			Ŀ	_ Change	Addition	
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET						
CITY-ST-ZIP		DELETE	5.4 CITY - S 6.1 TITLE	i · ZIP		·	Change	Addition	
TITLE		_ occur	6.2 NAME			L	a dismille	-10011001	
NAME CINCET ADDRESS			6.3 STREET	ADDRESS					
STREET ADDRESS			6.4 CITY - S						
City-St-ZiP	certify that the information supplied	with this filing does not qualify f	or the exemp	tion stated in	Section 119.07(3)(i), Florida Statutes.	I further certif	y that the	information	
indicated officer or	on this annual report or supplemen	ital annual report is true and acc eceiver o <u>r trust</u> ee empowered to	curate a nd th	at my signati	ure shall have the same legal effect as quired by Chapter 607, Florida Statutes	if made unde	r oath; tha	atiam an	