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 # P96000019173 (9)

NEPTUNE ONE, INC.

FILED Apr 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						# IEDITODI ATA COLLA DELITE DETEL MOTELE CALLE DEL	BI 11819 1 81	Mi inder i	10008 1911 19 9 1
7783 NW 56TH ST. 7783 NW 56TH ST. MIAMI FL 33173 MIAMI FL 33173						DO NOT WRITE IN T	THIS SPA	ACE.	
						3. Date Incorporated or Qualified 03/01/1996			
2. Principal P	lace of Business	20. Mailing Add	ess			4. FEI Number			Applied For
21		26				65-0650664			Not Applicable
Suite, Apt.	#, e tc.	27				5. Certificate of Status Desired S8.75 Additional Fee Required			
City & State	6	City & State 28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country Zip		Cot	ıntry		8. This corporation owes or has paid the current year intangible			
24			30	<u> </u>		Personal Property Tax due June 30. Yes No			
	9. Name and Address of Curre	ent Registered Agent	·-	81	N	10. Name and Address of New Registe	ered Age	int	
	nrique, ersia i			61	Name				
	I W. PARK DR., #103 AMI FL 33173				Street Addr	ress (P.O. Box Number is Not Acceptable)			
MIA	AMILE 2211.5			83	<u></u>				
				84	City			35 Zi	p Code
				34	Oity		FL) Z1	p code
office or n agent. I a SIGNATURE	egistered agent, or both, in the Stat m familiar with, and accept the obli Signature, typed or printed name of registered a	gations of, Section 607.	0505, Florida Stat	tutes	i.	tion's board of directors. I hereby accept the	e appoin	ment a	as registered
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND D	RECT(ORS IN 12
TITLE	DPS	DI	LETE 1.1 TI	TLF				Change	e 🔲 Addition
NAME	MANRIQUE, ERSIA I		12 N	AME	Ì				
STREET ADDRESS	2100 S.W. 122 COURT		1.3 S	IREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33175			TY - \$	T - ZIP				
TITLE		☐ D8						Change	e 🔲 Addition
NAME			2.2 N		Ì				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE					ST-ZIP			Change	e Addition
NAME		[] UI	3.111 3.2 N				L	onangi	V AUGIDUII
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP									
TITLE		D8			1 211			Change	e Addition
NAME			4. 2 N					- 6	
STREET ADDRESS			4.3 S	TREET.	ADDRESS				1
CITY-ST-ZIP				ITY-SI					
TITLE		DE	LETE 5.1 TI	TLE				Change	e 🔲 Addition
NAME			5.2 N	AME					
STREET ADDRESS			5.3 \$1	THEET	ADDRESS -				:
CITY-ST-ZIP				ITY-\$1	T-ZIP		····		
TITLE		☐ DE	LETE 6.1 11	TLE		_		Change	e 🔲 Addition
name			6.2 N	AME.					
STREET ADDRESS			6.3 \$1	TREE1.	ADDRESS				
CITY-ST-ZIP			6.4 CI	TY-\$1	T- 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 oath; that I am an officer or director of the corporation of 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 change it, or on any placehment with an address.

04/20/98 (305)222-4780