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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

30

81 Name

DOCUMENT # P96000025412

DIC DECRETTES INC

FLO FROFERILO, INC.	
Principal Place of Business	Mailing Address
420 LINCOLN ROAD. STE 432 MIAMI FL 33139 US	420 LINCOLN ROAD. STE 432 MIAMI FL 33139 US
2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
7:- Carratar	Zin Country

9. Name and Address of Current Registered Agent

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90171 040 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

Fee Required

\$5.00 May Be

Added to Fees

X Yes

Not Applicable \$8.75 Additional

3. Date incorporated or Qualifed

5. Certifcate of Status Desired

Trust Fund Contribution

Personal Property Tax.

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

03/21/1996 4. FEI Number

65-0664739

Pt C	INVESTMENTS INC						
420 LINCOLN RD, STE 432 MIAMI FL 33139			2 Street Address (P.O. Box Number is Not Acceptable)				
		84	City	FL	85 Zip C	ode	
44	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, t	he above	-named		changing its	egistered	
office or re	of the provisions of Sections 607.222 and 67.1265, india States of Significant agent, or both, in the State of Florida. Such change was authon familiar with, and accept the obligations of, Section 607.0505, Florida	rized by	the compo	pration's board of directors. I hereby accept the appo	intment as reg	istered	
SIGNATURE				required when reinstating) DATE			
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered AND DIRECTORS	13.	t signature r	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12	
т	PSD X DELETE	1.1 TITLE		President/Director	☐ Change	Addition	
TITLE	100	12 NAME				A-	
NAME	DATERON, DONALD III			Pablo L. Cejas			
STREET ADDRESS	0117 0.11. 00110 000111		ADDRESS	120 Hincoin Ab, 500 152	`,		
CITY-ST-ZIP	MIAMI FL 33143	1.4 CITY-S	r-ZIP	Miami Beach, FL 33139	☐ Change	Addition	
TITLE	☐ DELÉTÉ	2.1 TITLE		Vice President/Directo	□ Cuange	X	
NAME	22			Julie L. Neitzel		ĺ	
STREET ADDRESS	23:		ADDRESS	420 Lincoln Rd, Ste 432			
CITY-ST-ZIP			T- ZIP	Miami Beach, FL 33139	Change	Addition	
TITLE	☐ DELETE 3.			Director/Secretary/Treasure	r □ Change	Addition A	
NAME		3.2 NAME		Hilda C. Montero	·.		
STREET ADDRESS		3.3 STREET	ADDRESS	420 Lincoln Rd, Ste432			
CITY-ST-ZIP		34. CITY-S	T-ZIP	Miami Beach, FL 33139			
TITLE	DELETE 4.1				☐ Change	Addition	
NAME		4. 2 NAME					
STREET ADDRESS		4.3 STREET	ADDRESS		ž.		
CITY-ST-ZIP		4.4 CITY-S	r-zip				
TITLE	☐ DELETE	5.1 TITLE			☐ Change	☐ Addition	
NAME		5.2 NAME		•	,		
STREET ADDRESS		5.3 STREET	ADDRESS				
CITY-ST-ZIP		5.4 CITY-S	r-ZIP				
TITLE	☐ DELETE	6.1 TITLE			Change	☐ Addition	
NAME		6.2 NAME					
STREET ADDRESS]	6.3 STREE	ADORESS		•	}	
CITY-ST-ZIP		6.4 CITY-S					
14. I hereby c	certify that the information supplied with this filing does not qualify for the	exempt	on state	d in Section 119.07(3)(i), Florida Statutes. I further ce	rtify that the in	formation	

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, with all other like empowered.

Hildalc. Monters, Secretary

SIGNATURE:

1/15/99

305-531-5220