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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000030838 (2)

FILED Apr 22 1998 8:00am Secretary of State

		DEVELOPME						
Principal Place of Business Mailing Address								
1470 N.W. 107 AVENUE, SUITE C 1470 N.W. 107 AVENUE, SUITE C MIAMI FL 33172								
ANNUAL TE VOTE							DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified
2 Principal D	long of Business		25 14016	no Address				04/09/1996
2. Principal Place of Business 2e. Mailing Address								4. FEI Number Applied For
26 Suite, Apt. #, etc. Suite, Apí. #, etc.								65-0690817 Not Applicable \$8.75 Additional
22	,		27					5. Certificate of Status Desired Fee Regulred
City & State	е		City	& State	**			6. Election Campaign Financing \$5.00 May Be
23			28					Trust Fund Contribution Added to Fees
	Zip Country		Zip	F-4 '		Country		8. This corporation owes or has paid the current year Intangible
24	9 Name en	d Address of Curr	29 ent Benistered	Acent	30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
EA	MADA, MARIO		one registered	Agoin		81	Name	IV. Hallo and Address of her negistered Agent
		AVENUE, SUITE (^			82		
1	AMI FL 33172	,				Street Add	ddress (P.O. Box Number is Not Acceptable)	
••••	, IIIII (1 E 001) E	,				83	·	
	य :					84	City	■■ 85 Zip Code
							-	FL 11 / 1
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named co-							orporation submits this statement for the purpose of changing its registered	
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								
12.	Signature, typed or p	orinled name of registered in OFFICERS A	ND DIRECTORS		TE Registered	Age	nt signaturo requ	equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D			DELETE	1.1 10	 [LE		Change Addition
NAME	FAMADA,	MARIO			1,2 NA	ME		
STREET ADDRESS	1470 N.W.	107 AVENUE, S	UITE C	1.3 STRE			ADDRESS	
CITY-ST-ZIP	MIAMI FL	33172			1.4 CI	TY-S1	T- ZIP	
TITLE	P			☐ DELETE	2.1 TiT	LE		Change Addition
NAME	BENITEZ,		_		2.2 NA	ME		
STREET ADDRESS		107 AVE SUITE	C				ADDRESS	
CITY-ST-ZIP TITLE	MIAMI FL	33172		DELETE	2. 4 CI		T-ZIP	Change Addition
NAME				ب مدرداد	3.1 TIT 3.2 NA			L Change L Addition
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP					3.4. C)			
TITLE				DELETE	4.1 TIT			Change Addition
NAME					4, 2 N/	AME		
STREET ADDRESS					4.3 ST	REET	ADDRESS	
CITY-ST-ZIP					4.4 CI	Y-ST	r-ZIP	
TITLE				☐ DELETE	5.1 TIT	LE		Change Addition
NAME					5.2 NA			
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP	·	···		DELETE	5.4 CH		r - ZIP	☐ Change ☐ Addition
TITLE Name				☐ DETEIE	6.1 TH 6.2 NA			☐ Change ☐ Addition
STREET ADDRESS					•		ADDRESS	
CITY-ST-ZIP					6.4 CIT			
	ertify that the in	formation supplied	with this filing d	oes not qualify				in Section 119.07(3)(i), Florida Statutes. I further certify that the information

Indicated on this annual report or supplied with this him does not qualify for the exemption stated at Section 119.07(5)(f), Florida Statutes. Turther certify that the informatic 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 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.