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

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

## ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** P96000032093 (2)

## **FILED** May 08 1998 8:00am Secretary of State

CLR IN	MPORT &	EXPORT AND		INC.							
732 NW 42 WAY DEERFIELD BEACH FL 34442 DEERFIELD BEACH FL 34442								DO NOT WRITE IN THIS SPACE			
i								3. Date Incorporated or Qualified		3 01 7102	
2. Principal Place of Business 2a. Mailing Address							·····	04/12/1996 4, FEI Number			nation for
	lace of busin	16055	·	h				1		<del></del>	pplied For
21	<b>A</b> -1:		26				65-0716739			ot Applicable	
Suite, Apt.	₩, ΘιC.		<b>├</b> ¬	Suite, Apt. #, etc.			5. Certificate of Status Desired		<b>+</b> - · · · ·	Additional	
22		<del></del>	27							equired	
City & Stat	19		<u> </u>	City & State			6. Election Campaign Financing	r-1		May Be	
23		l Country	28					Trust Fund Contribution Added to Fees			
Zip	<u>├</u> ─┐ `			<u> </u>		Country		8. This corporation owes or has paid the current year Intangible			
24	25 g. Name and Address of Curr			[29]		30		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent			
ļ			Current Regist	ered Agent		81	Name	10. Name and Address of New F	registered	3 Agent	
	Beiro, Cel					"	Name				
732 NW 42 WAY						82	Street Addr	ess (P.O. Box Number is Not Accept	able)		
DEERFIELD BEACH FL 34442				!							
ł						83					
						84	City	· · · · · · · · · · · · · · · · · · ·	F	85 Zip	Code
44 5			07.000 1.00	37.4500 Ft- 1:4: Ot-4		Ш					
1	registered ag am familiar w	gent, or both, in the lith, and accept the	e State of Florid e obligations of	la Such change was , Section 607.0505, F	authorize lorida Sta	d by tutes	the corporat	poration submits this statement for the ion's board of directors. I hereby according to the control of the cont	ept the ap	opointment as	registered
SIGNATURE	Signature, typed	d or printed name of regis	lared agent and bile	if applicable. (NC	TE: Registere	d Age	nt signature requir	ed when reinstating)	DATE		
12.			RS AND DIREC		13.			ADDITIONS/CHANGES TO OFF	ICERS AI	ND DIRECTOR	RS IN 12
TITLE	P			DELETE	1.1 T	ITLE	T			Change	Addition
NAME	RIBEIRO	), celio l			1.2 N	AME	- 1				
STREET ADDRESS		/ 42 WAY		1.3 9		TAFFT	ADDRESS				
CITY-ST-ZIP	1	ELD BEACH FL	34442			ITY-S1	i				
TITLE	OLC: HT	COU DENOTITE	OTTIE	DELETE	2.1 Ti		1 - 211			Change	Addition
NAME					2.2 N						
STREET ADDRESS	ļ				- E		ADDRESS	•			
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TITLE	<del> </del>			DELETE	3.1 Ti		ST-ZIP			Change	Addition
NAME				Car Decese						CT Suggige	radicoli
	İ				3.2 N		ADDDCCC				
STREET ADDRESS	1						ADDRESS				
CITY-ST-ZIP	<del> </del>			DELETE		ITY-S	I · ZIP			Channe	Addition
TITLE				DECEIE	4.1 Ti		ĺ			L Change	ווטוווטטא 🗀
NAME	1				4. 2 N						
STREET ADDRESS					435	TREET	ADDRESS				
CITY-ST-ZIP	<u> </u>		<del></del>			ITY - S	T-ZIP				
TITLE				DELETE	5.1 TI	TLE				Change	Addition
NAME					5.2 N	AME					
STREET ADDRESS					5.3 S	TREET	ADDRESS				
CITY-ST-ZIP					5.4 C	ITY-S	7-ZIP				
TITLE				☐ DELETE	6.1 TI	TLE				Change	Addition
NAME					6.2 N	AME					
STREET ADDRESS					6.3 \$	TREET	ADDRESS				
CITY ST. 710	1					ITV CI					

14. I hereby 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 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.

SIGNATURE: