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 # P96000034020 (3)

CHAVA WIRE LATH, INC.

Principal Place of Business Mailing Address 20705 SW 120TH CT. MIAMI FL 33177

FILED May 05 1998 8:00am Secretary of State



20705 SW 120TH CT. MIAMI FL 33177 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/18/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 65-0683262 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zio Country Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. □ No 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CHAVARRIA, DONALDO 20705 SW 120TH CT. Street Address (P.O. Box Number is Not Acceptable) R2 MIAMI FL 33177 83 84 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change Addition TITLE CHAVARRIA, DONALDO 1.2 NAME NAME 20705 SW 120TH CT. STREET ADDRESS 1.3 STREET ADDRESS MIAM! FL 33177 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE CHAVARRIA, CARMEN 2.2 NAME 20705 SW 120TH CT. STREET ADDRESS 2.3 STREET ADDRESS MIAM! FL 33177 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE 3 1 TITLE Change Addition TITLE NAME 3 2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4.2 NAME MILLER 4.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE ☐ Change Addition 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-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 or the recover 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, of on an attachment with an address.

SIGNATURE: