## 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

## DOCUMENT # P9600036570

1. Corporation Name

LA GORDA CORPORATION

Mailing Address		
11180 SNAPPER CREEK ROAD MIAMI FL 33156		
2a. Mailing Address		
26	}	
Suite, Apt. #, etc.		
duite, Apr. #, etc.	I	
	11180 SNAPPER CREEK ROAD MIAMI FL 33156  2a. Mailing Address 28	

## **FILED** Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90089 012 \*\*\*150.00



Principal Place	of Business	Mailing Address					180 -1110 01101 0111	,, , <b>,,</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
11180 SNAPPER CREEK ROAD 11180 SNAPPER CREEK ROAD									
MIAMI FL 33156 MIAMI FL 33156					DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed			
						04/26/1996			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	A	pplied For	
21		26				65-0803904		lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		Additional	
22		27				o. Certificate of Status Desired	Fee R	lequired	
City & State	•	City & State				6. Election Campaign Financing		May Be	
23		28				Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	Co₁	intry	1	8. This corporation owes the current year		<b></b>	
24	25	29	30	,		Personal Property Tax.	☐ Yes	□No	
	9. Name and Address of Current	Registered Agent			<del></del>	10. Name and Address of New Registere	ed Agent		
. ⊔AT	TLER, RICHARD M			81	Name			į	
	O SNAPPER CREEK ROAD			82	Street Addr	ess (P.O. Box Number is Not Acceptable)			
1	II FL 33156								
MIAN	M LF 23 120			83				ļ	
				84	City		85 Zip	Code	
						<b>F</b>	· <b>L</b> .		
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	· -							ļ	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NO	TE: Registered	Ager	nt signature required				
12.	OFFICERS AND	· — — — — · · · · · ·	13.			ADDITIONS/CHANGES TO OFFICERS			
TITLE	D	☐ DELETE	1.1 TJ	TLE			☐ Change	Addition	
NAME	GONZALEZ, EDUARDO		1.2 N/	AME				Į	
STREET ADDRESS	11180 SNAPPER CREEK ROAD		1.3 S	TREE!	TADDRESS				
CITY-ST-ZIP	MIAMI FL 33156		1.4 CI	TY-S	T-ZIP				
TITLE		☐ DELETE	2.1 TI	TLE			☐ Change	Addition	
NAME			2.2 N/	ME				j	
STREET ADDRESS			2.3 S	TREET	TADDRESS			Ì	
CITY-ST-ZIP			2. 4 C	ITY-S	ST-ZIP				
TITLE		☐ DELETE	3.1 TI	TLE			☐ Change	☐ Addition	
NAME			3.2 N	AME					
STREET ADDRESS			3.3 S	TREE	T ADDRESS			Ì	
CITY-ST-ZIP			3.4. C	ITY-S	ST-ZIP				
TITLE		☐ DELETE	4.1 TI	TLE			Change	Addition	
NAME			4. 2 N	AME	ļ				
STREET ADDRESS			4.3 S	TREE?	TADDRESS			(	
CITY-ST-ZIP			4.4 C	TY-S	ST-ZIP				
TITLE		☐ DELETE	5.1 Ti	TLE			Change	☐ Addition	
NAME			5.2 N	AME		·		Ì	
STREET ADDRESS			5.3 S	TREE	T ADDRESS			l	
CITY-ST-ZIP			5.4 C	TY-S	ST-ZIP				
TITLE		☐ DELETE	6.1 TI	πE		•	Change	☐ Addition	
NAME			6.2 N	AME					
STREET ADDRESS			6.3 \$	TREE	TADDRESS	•		ľ	

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 suppliemental 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, with all other like empowered.

6.4 CITY-ST-ZIP

**SIGNATURE:** 

CITY-ST-ZIP

ED NAME OF SIGNING OFFICER OR DIRECTOR