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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Feb 03 1998 8:00am

| | 1998 | TEGE ! | DIVISION OF | CORPORATI | ONS | Secretar | y of S | state |
|------------------------|--|---------------------|-------------------|----------------------------|-------------------|--|----------------------|-------------------|
| 1 | MENT # P9600 ERS 'N MORE, INC. | 00426 | 51 (5) | | | | | |
| | | | | | | | | |
| Principal Plac | ce of Business | Mailing A | ddress | | | | | |
| 11445 SW 40TH ST | | 11445 SW 40TH ST | | | | | | |
| Miamifl 33 US | 165 | MIAMI FI US | L 33165 | • | | DO NOT WRITE IN T | HIS SPACE | |
| | | | | | | 3. Date Incorporated or Qualified | | |
| 2. Principal F | Place of Business | 2a. Mailin | g Address | | | 05/20/1996 4. FEt Number | TTA | pplied For |
| 21 1144 | 5 5W 40 ST | 26 | SAME | _ | | 65-0666501 | - | ot Applicable |
| Suite, Apt. | #, etc. | ├ ─¬ | Apt. #, etc. | | | 5. Certificate of Status Desired | | Additional |
| City & Stat | te | 27 City & | State | | | | | equired |
| 23 | 28 | | | | | 6. Election Campaign Financing Trust Fund Contribution | | May Be to Fees |
| Zip | Country | Zip | | Country | , | 8. This corporation owes or has paid the | | |
| 24 | 9. Name and Address of Curre | 29 | cont | 30 | | Personal Property Tax due June 30. 10. Name and Address of New Registe | | □ No |
| PC | OSE, MAYRA C | ur veðisteten v | rgent | 81 | Name | 10. Name and Address of New Registe | rea Agent | |
| | 445 SW 40TH ST | | | 80 | | / (0.0 D. N | | |
| MIAMI FL 33165 | | | 82 | | Street Add | dress (P.O. Box Number is Not Acceptable) | | |
| | | | | 83 | | | | |
| | | | | · 84 | City | | 85 Zip | Code |
| 11. Pursuant | to the provisions of Sections 607.05 | 02 and 607 1508 | R Florida Statut | os the above | a-named cor | rooration submite this etatement for the pure | -L ` | lo registered |
| office or r | registered agent, or both, in the State | e of Florida, Such | h change was a | aulhorized by | the corpora | rporation submits this statement for the purpo- ation's board of directors. I hereby accept the | appointment as | registered |
| SIGNATURE | and accept the cong | janons or, occur | 11 (COCO. 100 III | Jiloa Statutes | > . | | | |
| | Signature, typed or printed name of registerest ag | | ile. (NOT | | nt signature reou | uired whon reinstating) DA | | |
| 12. | PD OFFICERS AN | ID DIRECTORS | DELETE | 13. | | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTOR Change | Addition |
| NAME | ROSE, MAYRA C | | | 1.2 NAME | ļ | | □ Cularigo | יים אטטווטוו ן |
| STREET ADDRESS | 4301 SW 4TH STREET | | | 1.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | MIAMI FL 33134 | | | 1.4 C/TY-S | T-ZIP | | | |
| TITLE | STD | | DELETE | 2.1 TITLE | | | Change | Addition |
| NAME Street address | URIARTE, ALEJANDRO C JR 4301 SW 4TH STREET | • | | 2.2 NAME | 4000000 | | | |
| CITY-ST-ZIP | MIAMI FL 33134 | | | 2.3 STREET 2.4 CITY - S | | | | |
| TITLE | | | DELETE | 3.1 TITLE | 11*211 | | ☐ Change | Addition |
| NAME | | | | 3.2 NAME | | | - | ľ |
| STREET ADDRESS | | | | 3.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | *************************************** | · | DECETE | 3.4. CITY-S | T-ZIP | | | 7.33 |
| TITLE NAME | | | ☐ DELETE | 4.1 TITLE | | | Change | ☐ Addition |
| STREET ADDRESS | | | | 4. 2 NAME 4.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | | 4.4 CITY - ST | ļ | | | |
| TITLE | | | DELETE | 5.1 TITLE | | | Change | Addition |
| NAME | | | | 52 NAME | - | | | |
| STREET ADDRESS | | | | 5 3 STREET | | | | |
| CITY-ST-ZIP TITLE | | | DELETE | 5.4 CITY-ST 6.1 TITLE | - 2IP | | Change | Addition |
| NAME | | | | 6.2 NAME | | | <u> —</u> Спанув | ☐ vooiiioii |
| STREET ADDRESS | | | | 6.3 STREET | ADDRESS | | | İ |
| CITY-ST-ZIP | | | | 6.4 CITY - ST | - ZIP | | | |
| 14. I hereby c | ertify that the information symplied w | ith this filled doc | s not qualify fo | r the exempt | on stated in | Section 119.07(3)(i), Florida Statutes, I furthe | r certify that the | information |

indicated on this annual report or supplementar and officer or director of the corporation or the receiver Block 12 or Block 13 if changed, or do an algorithm and accurate and that my signature shall have the same legal effect as if made under oath; that I am an fored to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in ss.