

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

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90060 036 ***150.00

DOCUMENT # P96000044366

1. Corporation Name

RENEW ENTERPRISES, INC.

Principal Place of Business

423 SW 19TH RD
MIAMI FL 33129
US

Mailing Address

423 SW 19TH RD
MIAMI FL 33129
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/23/1996

4. FEI Number

65-0668132

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

LOPEZ, ALEJANDRO
9929 NW 5TH LANE
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name

LOPEZ, ALEJANDRO

82 Street Address (P.O. Box Number is Not Acceptable)

423 SW 19TH RD.

83

84 City

Miami

FL

85 Zip Code

33129

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]

(NOTE: Registered Agent signature required when reinstating)

DATE

4/15/99

12. OFFICERS AND DIRECTORS

TITLE PD
NAME LOPEZ, ALEJANDRO
STREET ADDRESS 9929 NW 5TH LANE
CITY-ST-ZIP MIAMI FL 33172

DELETE

TITLE STD
NAME LOPEZ, MIRTA
STREET ADDRESS 9929 NW 5TH LANE
CITY-ST-ZIP MIAMI FL 33172

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME LOPEZ, ALEJANDRO
1.3 STREET ADDRESS 423 SW 19TH RD
1.4 CITY-ST-ZIP MIAMI, FL 33129

Change Addition

2.1 TITLE STD
2.2 NAME LOPEZ, MIRTA
2.3 STREET ADDRESS 423 SW 19TH RD
2.4 CITY-ST-ZIP MIAMI, FL 33131

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

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 in an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/99 305-860-8396

Date

Daytime Phone #

CR2E034 (11/98)