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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P96000051277 (7)

FILED Jun 02 1998 8:00am Secretary of State

BOOKS & MAS, INC. Principal Place of Business Mailing Address 5246 S.W. BTH STREET 5246 S.W. 8TH STREET MIAMI FL 33134 CORAL GABLES FL 33134 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/14/1996 2. Principal Place of Business 2a. Mading Address 4. FEI Number Applied For 21 65-0720165 Not Applicable Suite, Apt. #, etc Suite, Apt #, etc. **\$8.75** Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution 28 Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. [] No 25 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 FERNANDEZ, SUSANA G Name 5246 \$.W. 8TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33134 83 **64** 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 faculiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURÍ [NOTE Bogistered Agent signature required when reinstating) R2E034 (10/97 OFFICERS AND DIRECTOR ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, 13. Change DETETE 11 1110 F TITLE ALVAREZ, AMERICA NAME 1.2 NAME 10340 SW 68TH ST 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition TITLE 2.1 TITLE **GUTIERREZ, ARMANDO F** NAME 2.2 NAME 8781 SW 40TH ST 2 3 STREET ADDRESS STREET ADDRESS MIAMI FL 2. 4 CHY-ST-ZIP CITY-ST-ZIP DELLTE 3.1 THLE ☐ Change Addition TITI F NAME ALVAREZ, ORESTES 3.2 NAME 10340 SW 68TH ST 3.3 STREET ADDRESS STREET ADDRESS **MIAMI FL** CITY-ST-ZIP 3.4. CITY-S1-ZIP Change DELETE Addition 4.1 THLE TITLE FERNANDEZ, SUSANA G NAME 4. 2 NAME 8525 SW 110TH ST STREET ADDRESS 4.3 STREET ADDRESS **MIAMI FL** CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELETE Change Addition 5.1 TITLE TITLE GUTIERREZ, ADA A 5.2 NAME NAME 8781 SW 110TH ST 5.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition 6.1 THILE TITLE 4000025503**1**4 ALVAREZ. MAGDALENA NAME 6.2 NAME -06/08/98--01013--0**03** 10340 SW 68TH ST STREET ADDRESS 6.3 STREET ADDRESS ***150.00 MIAMI FL CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling 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 supplicemental 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 13 if changed, or on an attachment with an address

CIONATURE DIVARA TURARDIA

ubelge

(305)444-9884