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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 21 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Principal Place	e of Business	Mailing Address			2111 22121 21101 11201 E111A 21101 1211 1221
14210 SW 23 MIAMI FL 331		14210 SW 23 LN. Miami Fl 33175			
MUUMI PL 331	1/3	MIMMI PL 33173		DO NOT WRITE	E IN THIS SPACE
				<ol> <li>Date Incorporated or Qualified 06/17/1996</li> </ol>	
2. Principal Pl	lace of Business	2a. Mailing Address 26		4. FEI Number 65-0679957	Applied For Not Applicab
Suite, Apl	#. etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
_ Zip	Country	Zip	Country	8. This corporation owes or has pa	
4	25 9. Name and Address of Cui	29	30	Personal Property Tax due June 10. Name and Address of New Re	
		Light Weditraled Walls	81 Name	10, Name and Address of New No	SAME AND ADDRESS OF THE PROPERTY OF THE PROPER
	lle, julio del 210 SW 23 LN.				
	AMI FL 33175		82 Street Ad	dress (P.O. Box Number is Not Acceptal	DIE)
*****			63		V
			84 City		<b>■■ 85</b> Zip Code
			1 7 7		FL [ ]
office or re	egistered agent, or both, in the Si m familiar with, and accept the ot	tale of Florida. Such change was a	authorized by the corpor	orporation submits this statement for the pration's board of directors. I hereby acce	pt the appointment as registered
•					
SIGNATURE	Signature, typed or printed name of registered	-	E. Registered Agent signalure reg	juired when reinstating)	DATE
SIGNATURE .	Signature, typed or printed name of registered OFFICERS	d agent and title if applicable (NOT AND DIRECTORS		julred when reinstating)  ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12
SIGNATURE .	OFFICERS P	d agent and title if applicable (NOT	E: Registered Agent signalure req		
SIGNATURE .	P VALLE, JULIO DEL	d agent and title if applicable (NOT AND DIRECTORS	E Registered Agent signature req 13. 1.1 TITLE 1.2 NAME		CERS AND DIRECTORS IN 12
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