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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000051791 (7)

Country

25

WINMAR ENTERPRISES, CORP.

Principal Place of Business	
2521 SW 24 CT MIAMI FL 33133	

Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

21

22

23

24

Zip

Mailing Address

2521 SW 24 CT MIAMI FL 33133

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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FILED Apr 03 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Yes No

Not Applicable

06/18/1996

65-0677333

5. Certificate of Status Desired

Trust Fund Contribution

Election Campaign Financing

Personal Property Tax due June 30.

g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
2521 SW 24 CT MIAMI FL 33133			81	Name					
			82	Street	ddress (P.O. Box Number is Not Acceptable)				
			83						
			84	City		5 Zip C	ode		
			"	Oily	FL í°	2.00			
11. Pursuant to the provisions of Soctions 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating). DATE									
12.	Signature, typed or printed name of registered agent and title if app OFFICERS AND DIRECTO		13,	ni signature	e required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DI	DECTOR	E IN 12		
TITLE	P	DELETE	1.1 TITLE			Change	Addition		
NAME	REYES, RAFAEL		1.2 NAME	1		· · · · · · · · · · · · · · · · · · ·			
STREET ADDRESS	2521 SW 24 CT	1	1.3 STREET	ADDRESS	}		Ì		
CITY-ST-ZIP	MIAMI FL 33133		1.4 CITY-S						
TITLE	V	DELETE	2.1 TITLE			Change	Addition		
NAME	REYES, MARGARET		2.2 NAME]		
STREET ADDRESS	2521 SW 24 CT		2.3 STREET	ADDRESS					
CITY-S1-ZIP	MIAMI FL 33133	Ì	2. 4 CITY - 5	T-ZIP					
TITLE		☐ DELETE	3.1 TITLE			Change	Addition		
NAME		1	3.2 NAME	Ï					
STREET ADDRESS			3.3 STREET	ADDRESS					
CITY-ST-ZIP			3.4. CITY - 5	T- 21P					
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition		
NAME		i	4. 2 NAME				ļ		
STREET ADDRESS			4.3 STREET	ADDRESS					
CITY-ST-ZIP			4.4 CITY-S	T-ZIP					
TITLE		DELETE	5.1 TITLE		· ·	Change	Addition		
NAME			5.2 NAME						
STREET ADDRESS			5 3 STREET	ADDRESS					
CITY-ST-ZIP		T DELETE	5.4 CITY-S	T-ZIP		Channe	D. d. atticles		
TITLE		DELETE	6.1 TITLE		L	Change	Addition		
NAME			6.2 NAME						
STREET ADDRESS		Į.	6 3 STREET				į		
CITY-ST-ZIP	artifu that the information cumplied with this filing	done not qualify for th	6.4 CITY-S		ed in Section 119 07(3)(i) Florida Statutes I further certific	that the	oformation		
14. Thereby 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 supplied entral annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the roceiver or further 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 attachmore with an address									

Country

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