

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

FILED
Apr 30 1998 8:00am
Secretary of State

DOCUMENT # P96000052733 (8)

1. Corporation Name

ORSE CORPORATION



Principal Place of Business

Mailing Address

12615 SW 91 ST.
MIAMI FL 33186

12615 SW 91 ST.
MIAMI FL 33186

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30

3. Date Incorporated or Qualified

06/20/1996

4. FEI Number

65-0676035

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROUWER, IRAIDA
12625 SW 91 ST.
MIAMI FL 33186

81 Name Anamaria R. Scozzaro

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

83 24460 Yacht Club Boulevard

84 City Punta Gorda FL 85 Zip Code 33955

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, typed or printed name of registered agent and fee, if applicable

Anamaria Scozzaro

(NOTE: Registered Agent signature required when reinstating)

04/23/98

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME REVILLA, OSCAR W
STREET ADDRESS 12625 SW 91 ST., STE. 103
CITY-ST-ZIP MIAMI FL 33186

TITLE VP
NAME REVILLA, MANUELA
STREET ADDRESS 12615 SW 91 ST
CITY-ST-ZIP MIAMI FL 33186

TITLE S
NAME REVILLA, MARIA L
STREET ADDRESS 12615 SW 91 ST
CITY-ST-ZIP MIAMI FL 33186

TITLE T
NAME REVILLA, MARIA D
STREET ADDRESS 12615 SW 91 ST
CITY-ST-ZIP MIAMI FL 33186

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

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

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

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

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 on an attachment with an address.

SIGNATURE

04/23/98

CR2E034 (10/97)