

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000053101**

1. Corporation Name
THE IDEAL GROUP, INC.

Principal Place of Business

2600 SW 3RD AVE
SUITE 301
MIAMI FL 33129
US

Mailing Address

2600 SW 3RD AVE
SUITE 301
MIAMI FL 3129
US

FILED
Jul 16, 1999 8:00 am
Secretary of State

07-16-1999 90012 001 ***550.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/19/1996

4. FEI Number

65-0676083

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.

☐

Yes ☐ No

9. Name and Address of Current Registered Agent

GUTIERREZ, ARMANDO
2600 SW 3RD AVE
SUITE 301
MIAMI FL 33129

10. Name and Address of New Registered Agent

81 Name **Rivera, Wendy M.**
82 Street Address (P.O. Box Number is Not Acceptable)
1310 Flamingo Way
83
84 City **Miami Beach** FL 85 Zip Code **33139**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/8/99

DATE

OFFICERS AND DIRECTORS

<input checked="" type="checkbox"/> DELETE	D GUTIERREZ, ARMANDO 1111 LINCOLN RD, SUITE 805 MIAMI FL 33139
<input type="checkbox"/> DELETE	
<input type="checkbox"/> DELETE	
<input type="checkbox"/> DELETE	
<input type="checkbox"/> DELETE	
<input type="checkbox"/> DELETE	

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Rivera, Wendy M. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	1310 Flamingo Way
1.4 CITY-ST-ZIP	Miami Beach, FL 33139
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 furnished 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 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 on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Wendy M. Rivera **7/8/99** (305) 444-3060

0054831

CR2E034 (5/99)