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

**PROFIT** . CORPORATION ANNUAL REPORT

1998



FLORIDA DEFARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000055552 (9)

## **FILED** Apr 13 1998 8:00am Secretary of State

	ee of Business	Mailing Address			
13010 SW 11			13010 SW 117 TER.		
MIAMI FL 33186 MIAMI FL 331			FL 33186		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
}					07/01/1996
2. Principal F	Place of Business	2a. Mailing Addres	s		4. FEI Number Applied For
21		26	26		65-0676502 / Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, et	Suitc, Apt. #, etc.		5 Certificate of Status Desired \$8.75 Additional
22		27			/\ Fee Required
City & Stat	te	City & State			Election Campaign Financing \$5.00 May Be
23		28	1 600		Trust Fund Contribution Added to Fees
Zip Country		<del></del> -η	7:p Country 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
24	9. Name and Address of C	urrent Registered Agent	130		10. Name and Address of New Registered Agent
70.		The state of the s		81 Name	
	ONCOSO, PATRICIA		,		
	010 SW 117 TER.			82 Street	Address (P.O. Box Number is Not Acceptable)
MUA	AMI FL 33186		f	83	
•			į		
				84 City	FL 85 Zip Code
office or a	registered agent, or both, in the am familiar with, and accept the c	State of Florida Such change obligations of, Section 607.05	was authorized 05, Florida Stati	I by the corputes.	I corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
12.	Signature type dior printed name of register	S AND DIRECTORS	(NOTE: Hagistered	Agent signature	e required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELE		F	Change Addition
NAME	TRONCOSO, PATRICIA		1.2 NA		
STREET ADDRESS	13010 SW 117 TER.			REET ADDRESS	
CITY-SY-ZIP	MIAMI FL 33186			Y-ST-2IP	
TITLE	THE WILL I C GO TOO	DELET			Change Addition
NAME			2.2 NAI	ME	
STREET ADDRESS			23 STI	REET ADDRESS	
CITY-ST-ZIP			2 4 01	IY-SI-ZIP	
TITLE		DELET			Change Addition
NAME			3.2 NA	ME	
STREET ADDRESS			3.3 ST	REET ADDRESS	
CITY-ST-ZIP			3.4. Ci	Y-ST-71P	
TITLE		DELET	E 4.1 Till	.ŧ	☐ Change ☐ Addition
NAME			4. 2 NA	ME	
STREET ADDRESS			4.3 STF	REFT ADDRESS	
CITY-ST-ZIP				Y-ST-ZIP	
TITLE		DELET		î	Change Addition
NAME			52 NA		
STREET ADDRESS				IEFT ADDRESS	
CITY-ST-ZIP	<del></del>	The second		Y-ST-ZIP	
TITLE		ם סרגנו			Change Addition
NAME			6.2 NAI		
STREET ADDRESS				RET ADDRESS	
CITY-ST-ZIP			6.4 CiT	Y-ST-ZIP	

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 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 or an attachment with an address.

3/6/98

305-553-4332