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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000056689 (8)

CORVETT DREAMS, INC.

FILED Aug 26 1997 8:00am Secretary of State



12522 SW 128TH ST	1000	wannin waaress			Principal Place of Business Mailing Address					
MIAMI FL 33186	12522 SW 128TH ST MIAMI FL 33186-5423	12522 SW 128TH ST								
_						3. Date Incorporated or Qualified 07/01/1996	3a. Date of	Last R	eport Ke-	
2. Principal Place of Business		2a. Mailing Address				4. FEI Number	·		plied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				65-0692393 Not Applicab				
22			27			5. Certificate of Status Desired	1 1	Fee Re		
City & State		City & State			<u></u>	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zıp	Cou	intry		8. This corporation has liability for in				
24	25		29 30			Florida Statutes Yes No				
·	ne and Address of Current	i Hegistered Agent		81	Name	10. Name and Address of New Rec	jistered Agen	ıt .		
CENTURION				L.	Name				-	
12522 SW 1 MIAMI FL 33			82 Street A			lress (P.O. Box Number is Not Acceptable	e)			
MICHAILL C	100		83							
:				84	City	<u> </u>	FL 85	Zip (Code	
office or registered	visions of Sections 607.0502 agent, or both, in the State with, and accept the obliga	of Florida. Such change wa	is authorize	øb۱	/ the corpora	poration submits this statement for the pr tion's board of directors. I hereby accep	urpose of char	nging it nent as	s registered registered	
SIGNATURE	min, and accept the congu	mone of, because by leady,	i jointia otai	lutot						
Signature, ty	ped or printed name of registered agen			d Age	ent signature requ	red when reinstating)	DATE			
12.	OFFICERS AND	DELETE	13.			ADDITIONS/CHANGES TO OFFICE		ECTOR Change	S IN 12	
TITLE D	URION, LUIS		1.1 78				<u> </u>	วแซเเกิด	MODEOUI	
	SW 128TH ST		1.2 NAI 1.3 STF							
	FL 33186	1.4 Cr			- 1					
TITLE		DELETE 2.1 T						Change	Addition	
NAME		2.2 N								
STREET ADDRESS			2.3 \$	TREET	ADDRESS					
CITY-ST-ZIP		<u></u>	2 4 CITY-ST-ZIP							
TATLE		☐ DELETE	3.1 Tr	TLE				Change	Addition	
NAME			3.2 N	AME						
STREET ADDRESS					ADDRESS					
CITY-S1-ZIP		DELETE	34. C		ST-ZIP		177	Change	Addition	
TITLE NAME			4.1 Ji					vuailific	- Madition	
STREET ADDRESS			1		ADDRESS					
CITY-ST-ZIP					T-ZIP					
TITLE		DELETE	5.1 11		-			Change	Addition	
NAME			5.2 N	AME				-		
STREET ADDRESS			5.3 S	reet	ADDRESS					
CITY-S1-ZIP			5.4 CI	ITY-S	T-ZIP					
TITLE		☐ DELETE	6.1 11	TLE				Change	Addition	
NAME			6.2 N	AME						
STREET ADDRESS			6.3 ST	TREET	ADDRESS					
CITY-ST-ZIP		L sul ab a Cit			T-ZIP	d in Section 119.07(3)(i). Florida Statutes				

I do 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 I CONTINUED

8/22/07 305 378 8586