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

P96000062051 (3)

PROFIT CORPORATION ANNUAL REPORT

1998

DOCUMENT #



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 22 1998 8:00am
Secretary of State

1. Corporation	MOLD, INC.	. (0)			
112.77	WOLD, WO				
Principal Place	of Business	Mailing Address		{	
14630 BULLRUN STE 210 MIAMI LAKES FL 33014		14690 BULLRUN STE 210 MIAMI LAKES FL 33014		DO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualified	TO GI NOL
				07/24/1996	
2. Principal Pla	ace of Business	2a. Mailing Address	· ····	4. FEI Number	Applied For
21		26		65-0687495	Not Applicable
Suite, Apt. (#, etc	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25		10	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Curren	it Hegistered Agent	B1 Name	10. Name and Address of New Registers	au Agent
DA SILVA, ANTONIO F			Name	SAME	
14630 BULLRUN STE 210			62 Street Add	ress (P.O. Box Number is Not Acceptable)	
MI	AMI LAKES FL 33014		83		
			"		
	M		84 City		85 Zip Code
44 Dureupot t	o the political of Sections 607 050	2 and 607 1508. Horida Statutes	the above-named corr	poration submits this statement for the outroos	of changing its registered
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 office or registered of the corporation of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
	n famikawith, and accept the oblig	ations of, Section 607,0505, Flori	oa Statutes.	01	15-98
SIGNATURE .	Signal Corporated transport registered age	ILUA ANTONIO on and tolle of applicabile (NOTE:	Registered Agent signature requi	ired when reinstating) DAT	15 - 98
12.	OFFICERS AN	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	da silva, antonio f		1.2 NAME		
STREET ADDRESS	14630 BULLRUN STE 210		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI LAKES FL 33014		1.4 CITY - ST - ZIP		
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2 2 NAME		
STREET ADDRESS			2.3 STHEET ADDRESS		
CITY-ST-ZIP			2 4 CITY-ST-ZIP		Character Laddican
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3 4. CITY - ST - ZIP		Change Addition
TITLE			4.1 TITLE 4.2 NAME		Ovidagevindition
NAME Places recover					
STREET ADDRESS			4.3 STREET ADDRESS 4.4 CITY-S1-ZIP		İ
CITY-ST-7IP TITLE		DELETE	51 TIBLE		Change Addition
NAME			5.2 NAME		.= • ·
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - \$1 - ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			G.3 STREET ADDRESS		
CITY-\$1-7if			6.4 CITY - ST- ZIP		
311 31 71		31 Al 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A	# 211 miles at 1 miles	Coation 110 07/2Vii) Florida Statutos I furtho	e partiful that the information

4. Thereby certify that the information supply dwith 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 supply and ital 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 in the Jescover or trustoe 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 a paralla himent with an address.

CIONATUDE.

04-15-98