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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000062552 (0)

A/C ROJAS & SONS ENTERPRISE, INC.

## FILED Apr 03 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address			
7595 S.W. 152	AVENUE. H-406	7595 S.W. 152 AVENUE. H	- <b>40</b> 6		
MIAMI FL 33193 MIAMI FL 33193				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	2 117 11110 017102
				07/24/1996	
	lace of Business	2a. Mailing Address		4 FELNumber	Applied For
21 208	oi sid 103 (	J 26 ZOXOI S	SW 1036	<b>65-0680787</b>	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	liami FL	City & State	FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 33	Country 25	, 29 33) 99	Country DQD	8. This corporation owes or has popersonal Property Tax due June	e 30. 🔲 Yes 🔲 No
	9, Name and Address of Curr	ent Registered Agent		10. Name and Address of New Ro	agistered Agent
	IAS, VICTORIA		81 Name		
759	5 S.W. 152 AVENUE, H-406		82 Street Add	ress (P.O. Box Number is Not Accepta	ble)
MIA	MI FL 33193			· · · · · · · · · · · · · · · · · · ·	
			83		
			84 City		85 Zip Code
44	10 007.0	500 - 1007 H/ 00 FL - 1 - 0			FL   T
office or ri	o the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such charige was ac	uthorized by the corpora	poration submits this statement for the lion's board of directors. I hereby acce	purpose of changing its registered pt the appointment as registered
SIGNATURE		Les training to the second sec			
12.	Signature, typed or printed name of registered a  OFFICERS A	AND DIRECTORS	Registered Agent signature requi	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	ABBITIONS/CHANGES TO CITY	Change Addition
NAME	ROJAS, VICTOR RAUL		1.2 NAME		
STREET ADDRESS	7595 S.W. 152 AVENUE, H-	406	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33193		1.4 CITY-ST-ZIP		
TITLE	STD	☐ DELETE	2.1 TITLE		Change Addition
NAME	ROJAS, VICTORIA		2.2 NAME		
STREET ADDRESS	7595 S.W. 152 AVENUE, H-	406	2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33193		2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP		25.675	3.4. CITY - ST - ZIP		
THILE		☐ DELETE	4.1 THILE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
TITLE			5.2 NAME		Change Addition
j					
STREET ADDRESS			5.3 STREET ADDRESS 5.4 CITY-S1-ZIP		
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP		$\mathcal{O}$	6.4 CITY-ST-ZIP		
	ertify that the information supplied	with his filing does not qualify for		Section 119.07(3)(i), Florida Statutes, re shall have the same legal effect as i	I further certify that the information
officer or o	on this annual report or supplemendirector of the corporation or the corporation or the corporation of the c	fobiver of trustee empowered to ex	rate and that my signatu xecute this report as req	re shall have the same legal effect as i uired by Chapter 607, Florida Statules;	f made under oath; that I am an and that my name appears in

VICTOR RAW ROLLS