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

PROFIT CORPORATION ANNUAL REPORT



LLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1998 DIVISION OF DOCUMENT # P9600065809 (1

## FILED Feb 17 1998 8:00am Secretary of State

| 1. Corporation                    |   | 00065809 (1                           |                                      |  |                                     |
|-----------------------------------|---|---------------------------------------|--------------------------------------|--|-------------------------------------|
| Principal Place                   | of Business   | Mailing Address                       |                                      | i saallaat (18 18119 britt aante Afrit Daris Abis  | 8 81181 911\$1 LESIS 8814 1911 1991 |
| 38 NW 56TH AVE.<br>Miami FL 33126 |   | 38 NW 56TH AVE.                       |                                      |  |                                     |
|                                   |   | MIAMI FL 33126                        |                                      | DO NOT WRITE IN THIS SPACE   |                                     |
|                                   |   |                                       |                                      | 3. Date Incorporated or Qualified  |                                     |
|                                   |   |                                       |                                      | 08/05/1996   |                                     |
| 2. Principal Place of Business    |   | 2a. Mailing Address                   |                                      | 4, FEI Number  | Applied For                         |
| 21                                |   | 26                                    |                                      | 65-0723320   | Not Applicable                      |
| Suite, Apt. #, etc.               |   | Suite, Apt. #, etc.                   |                                      | 5. Certificate of Status Desired   | \$8.75 Additional<br>Fee Required   |
| City & State                      |   | City & State                          |                                      | 6. Election Campaign Financing   | \$5.00 May Be                       |
| 23                                |   | 28                                    | •                                    | Trust Fund Contribution  | Added to Fees                       |
| Zip                               | Country   | Z(p                                   | Country                              | 8. This corporation owes or has paid the   |                                     |
| 24                                | 25  | 29                                    | 30                                   | Personal Property Tax due June 30.   | ☐ Yes ☐ No                          |
|                                   | 9. Name and Address of Cur                              | rent Registered Agent                 |                                      | 10. Name and Address of New Registers  | d Agent                             |
| SC                                | ORIANO, ISMAEL  |                                       | 81 Name                              |  |                                     |
| 38 NW 56TH AVE.<br>Miami FL 33126 |   |                                       | B2 Street Add                        | dress (P.O. Box Number is Not Acceptable)  |                                     |
|                                   |   |                                       |                                      | the state of the s |                                     |
|                                   |   |                                       | 63                                   |  |                                     |
|                                   |   |                                       | 84 City                              | F  | 85 Zip Code                         |
| SIGNATURE 5                       | Signature typed or posted name of rejesters<br>OFFICERS | AND DIRECTORS                         | OTE: Registered Agent signature requ | uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A   |                                     |
| TITLE                             | D   | DELETE                                | 1.1 TITLE                            |  | Change Addition                     |
| NAME                              | SORIANO, ISMAEL   |                                       | : 1.2 NAME                           |  |                                     |
| STREET ADDRESS                    | 38 NW 56TH AVE.   |                                       | 1.3 STREET ADDRESS                   |  |                                     |
| CITY-ST-ZIP                       | MIAMI FL 33126  | Driett                                | 1.4 CITY - ST - ZIP                  |  | Change Addition                     |
| TITLE                             | D<br>CODIANO CICELA                                     | DELETE                                | 21 TULE                              |  | L Change L Addition                 |
| NAME<br>STREET ADDRESS            | SORIANO, GISELA<br>38 NW 56TH AVE.                      |                                       | 2.2 NAME                             |  |                                     |
| STREET ADDRESS                    | MIAMI FL 33126  |                                       | 2.3 STREET ADDRESS                   |  |                                     |
| CITY-ST-ZIP<br>TITLE              | MANULL OUTE   | DELETE                                | 2. 4 CITY - S1 - ZIP<br>3.1 TITLE    |  | Change Addition                     |
| NAME                              |   |                                       | 3.2 NAME                             |  |                                     |
| STREET ADDRESS                    |   |                                       | 3.3 STREET ADDRESS                   |  |                                     |
| CITY-ST-ZIP                       |   |                                       | 3 4. CITY - ST - ZIP                 |  |                                     |
| TITLE                             |   | DELETE                                | 4 1 TITLE                            |  | Change Addition                     |
| NAME                              |   |                                       | 4 2 NAME                             |  |                                     |
| STREET ADORESS                    |   |                                       | 4.3 STREET ADDRESS                   |  |                                     |
| CITY - ST - ZIP                   |   | · · · · · · · · · · · · · · · · · · · | 4.4 CITY - ST - ZIP                  |  |                                     |
| TITLE                             |   | ☐ DELETE                              | 5.1 TITLE                            |  | Change Addition                     |
| NAME                              |   |                                       | 5.2 NAME                             |  |                                     |
| STREET ADDRESS                    |   |                                       | 5 3 STREET ADDRESS                   |  |                                     |
| CITY-S1-ZIP                       |   | DELETE                                | 5.4 CITY-ST-ZIP                      |  | Change Addition                     |
| NAME                              |   | in berrie                             | 6.1 TITLE<br>6.2 NAME                |  |                                     |
| STREET ADDRESS                    |   |                                       | 6.3 STREET AODRESS                   |  |                                     |
| 1                                 |   |                                       | 6.4 CITY - ST- ZIP                   |  |                                     |
| CITY-ST-7IP                       | orbly that the information comple                       | d with this films does not qualify    |                                      | n Section 119.07(3)(i), Florida Statutes. I further  | certify that the information        |

14. 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 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 trusted 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:

Daytime Phone #