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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600066570

A & D GENERAL SERVICES INC.

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90079 010 ***150.00

	HIR BUIL BUIL	{

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Principal Place	e of Business	Mailing Address		,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
12889 S.W. 42N		12889 S.W. 42ND STREET					
MIAMI FL 33175		MIAMI FL 33173	MIAMI FL 33175		DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed			
				08/09/1996			
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	App	olied For	
21 2230	•	<u> </u>	AVENUE	65-0685581	Not	Applicable	
Suite, Apt.		Suite, Apt#, etc	**************************************		\$8.75 A	dditional	
22	# ₁ 0.00.	27		5. Certificate of Status Desired	Fee Red	quired	
City & State		City & State		6. Election Campaign Financing	\$5.00	Mav Be	
	, ,	28 Wialah 5	2	Trust Fund Contribution	Added to	- 1	
Zip	Alloah Country		ountry	8. This corporation owes the current year	Intangible		
		29 3 30 0 30	Dake	Personal Property Tax.	☐Yes	□No	
24 <u>330\</u>	9. Name and Address of Currer	<u> </u>		10. Name and Address of New Register	ed Agent	-	
	g. Name and Address of Carro.	The state of the s	81 Name				
GON	IZALEZ, RIGOBERTO			Ricoberto Cons	TEST		
	9 S.W. 42ND STREET		82 Street Address (P.O. Box Number is Not Acceptable)				
	# FL 33175		83	30 West 3 Avenue			
MIMI	/II FL 331/3		65				
			84 City		85 Zip C	ode	
			7	iialoah F		3010	
office or r	agistared agent or both in the State	02 and 607.1508, Florida Statutes, the of Florida. Such change was authorizations of, Section 607.0505, Florida Sta	en by the corbora	rporation submits this statement for the purpose tion's board of directors. I hereby accept the ap	pointment as reg	jistered	
	100		_	los tarkisas	15/99		
SIGNATURE	Signature, typed or printed name of registered age	int and title if applicable. (NOTE: Register	red Agent signature requi				
12.	OFFICERS AN	ND DIRECTORS 13	3.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO		
TITLE	VSTD	☐ DELETE 1.1	TITLE	CTEVAS	Change	☐ Addition {	
NAME	GONZALEZ, RIGOBERTO	1.2	NAME	consales, Ricoberto		ļ	
STREET ADDRESS	310 E. 39TH STREET	1.3	STREET ADDRESS	700 Ac 163 116			
CITY-ST-ZIP	MIAMI FL 33015	1.4	CITY-ST-ZIP	Widosh, F1 33013			
TITLE	P		TITLE		☐ Change	☐ Addition	
NAME	· •	22	NAME				
	COTARELLO, MARTA		STREET ADORESS		-		
STREET ADDRESS	10048 N.W. 41 STREET					- 1	
CITY-ST-ZIP	MIAMI FL 33178		4 CITY-ST-ZIP		Change	☐ Addition	
TITLE	··•	_			_ •	-	
NAME	-		NAME				
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		I. CITY-ST-ZIP		Change	Addition	
TITLE		☐ DELETE 4.1	ITITLE		☐ Cilarige	L. Addition	
NAME		4.2	2 NAME				
STREET ADDRESS		4.3	STREET ADDRESS				
CITY-ST-ZIP		4.4	CITY-ST-ZIP		`		
TITLE		☐ DELETE 5.1	ιπιε		☐ Change	☐ Addition	
NAME		5.2	NAME				
STREET ADDRESS		5.3	STREET ADDRESS				
CITY-ST-ZIP		5.4	CITY-ST-ZIP				
TITLE " "	1 L L 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		ITITLE		☐ Change	☐ Addition	
١٠.	Section 1	_	NAME			į	
NAME	T 25, 156.	63	STREET ADDRESS				
STREET ADORESS	J	0.0					

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 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, with all other like empowered.

SIGNATURE:

TURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

<u>4/15/99</u>

(305) 6679331 Daytime Phone #