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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000071935

1. Corporation Name

## **FILED** Jan 27, 1999 8:00am **Secretary of State**

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Principal Place	of Business	Maili	ng Address								
2565 NW 107 A		2565	NW 107 AVE								
MIAMI FL 33172 -			I FL 33172				DO NOT WRITE	IN THIS SPAC	:F		
	•						3. Date Incorporated or Qualifed	11113 31 70			
							08/27/1996				
			4-3i Address				4. FEI Number		App	lied For	c-
2. Principal Place of Business		- }	2a. Mailing Address				65-0692178	-		Applicable	1
21			Suite, Apt. #, etc.					\$8		ditional	Ş.
Suite, Apt.	#, etc.	27	ouite, Apr. #, etc.			كتبيد حسائين	5. Certificate of Status Desired	F	ee Req	uired	
22		<del></del>	City & State				6. Election Campaign Financing		5.00 A	/lav Be	
City & State		28	on, a onsie			•	Trust Fund Contribution		dded to		
23	Country		Zip	Co	untry		8. This corporation owes the curren	t year Intangible	e		
Zip	25	29		30	-		Personal Property Tax.	□ Ye		_No	
24	9. Name and Address of Curre		red Agent		$\top$		10. Name and Address of New Re	gistered Agent	<u> </u>		
	J. Harris area		, , , , , , , , , , , , , , , , , , ,		81	Name					
	REZ, JOSE A				82	Street Add	iress (P.O. Box Number is Not Acceptabl	e)			
2565	NW 107 AVE				62	Oli eet Add	reda (1.0. box realises to realises)		L14 191 1	. 41 *	
	/II FL 33172				83			College (3)		4	
MIAN					·		100 mars 2014	85	Zip C	ode	
MIAN	3				0.4	~		- 00			
11, Pursuant	to the provisions of Sections 607.05						poration submits this statement for the pu ion's board of directors. I hereby accept to	rpose of chang the appointmen	ning ite r	egistered	
11. Pursuant		e of Florida ations of, \$	Section 607.0505, F	lorida Sta	above ed by t atutes.	-named cor the corporat	red when reinstating): \(\frac{1}{2} \cdot \frac{1}{2} \cdot \frac	urpose of chang the appointmen	ging its r it as reg	egistered istered	(8)
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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 supplementary 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: