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**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000072621

1. Corporation Name

CRETONA INVESTMENTS INC

dillion	A HATCHMENTO, MO						
Principal Place	e of Business	Mailing Address			4 1001(00) (CD 10110 D1111 D0111 D0111 D0111	ile sûlêrû jinin njirê r	HODE HER TORS
2500 N.W. 79TH		2500 N.W. 79TH AVENUE					
SUITE 200	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Suite 200					
MIAMI FL 33122	2	MIAMI FL 33122			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					08/30/1996	· · · · · · · · · · · · · · · · · · ·	
2. Principal Pl	2a. Mailing Address	Mailing Address		4. FEI Number		plied For	
21		26			65-0753856		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	-\$8.75 A Fee Re	
City & State	e	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	o Fees
Zip	Country Zip		Country		8. This corporation owes the current year Intangible		
24	25 29 30		0	Personal Property Tax.		☐ Yes	□No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registere	d Agent	
			81	Name	•		
GOMEZ, NOELIA J			82	Street A	Address (P.O. Box Number is Not Acceptable)		
2500 N.W. 79TH AVE				0	radioss (1.10. Est italises to tree, total est,		<u> </u>
SUITE 200				3			
MIAMI FL 33122				0:4		. 85 Zip C	- ode
and the same of th				City		L   s   z p c	,006
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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE							
	Signature, typed or printed name of registered agent			ent signature re	equired when reinstating) DATE	AND DIDECTO	DC IN 42
12.	OFFICERS AND	DELETE	13.	——-т	ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE			•	İ		□jonango	
NAME	GOMEZ, ANTHONY R		1.2 NAME				
STREET ADDRESS	2500 N.W. 79TH AVENUE, SUIT	E 200	1.3 STREET ADDRESS				}
CITY-ST-ZIP	MIAMI FL 33122		1.4 CITY-	ST-ZIP			TT Addition
TITLE	VP □ DELETE 2.11		2.1 TITLE	į		☐ Change	Addition
NAME	COMEL, CALCAST		2.2 NAME	1			
STREET ADDRESS				ET ADDRESS	restance of the second of the second	· ·	1
CITY-ST-ZIP	MIAMI FL 33122		2.4 CITY-ST-ZIP			Change	Addition
TITLE	_ ===== 1		3.1 TITLE			change	
NAME	GOMEZ, RAMON A		3.2 NAME				
STREET ADDRESS	2500 N.W. 79TH AVENUE, SUITE 200 MIAMI FL 33122		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP				
CITY-ST-ZIP	VP	□ DELETE 4.1 TI				☐ Change	Addition
NAME	GOMEZ, NOELIA JR		4. 2 NAME			_ ,	_
	2500 N.W. 79TH AVENUE, SUIT	F 200		RESS		1	
STREET ADDRESS	-		U	1235	<u>.</u>		
CITY-ST-ZIP	MIAMI FL 33122	anno I-m	$\mathcal{A}$			Change	Addition
TIRE !	VP	(JUNIUC)	~	٠	RACHID JR, Mario		
NAME	RACHIOL, MARIO J			ESS	DICKID JE MUNIO		ĺ
STREET ADDRESS	2500 NW 79TH AVE #200	correction nove.		[3]			
CITY-ST-ZIP	MIAMI FL 33122	1 100		1	l		

CITY-ST-ZIP 14. I hereby certify that the information supplied with this ming 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:

TITLE NAME STREET ADDRESS

☐ Change

☐ Addition