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 # P96000072694

Y.P.F. PRODUCTION, INC.							
							411 1181 1181
Principal Place	e of Business	Mailing Address		_			
905 FAIRWEY DRIVE: 905 FAIRWEY DRIVE MIAMI BEACH FL 33141 MIAMI BEACH FL 33141					DO NOT WRITE IN THIS SPACE		
:					3. Date Incorporated or Qualifed		1
			•		09/03/1996	· · · · · · · · · · · · · · · · · · ·	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number		olied For
21		26			65-0691608	\$8.75 A	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	,		5. Certificate of Status Desired	Fee Red	
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	Fees
Zip 24	Country 25	Zip 30	Country		This corporation owes the current year In Personal Property Tax.	ntangible Yes	No
24	9. Name and Address of Curre		L		10. Name and Address of New Registered	l Agent	
			81	Name			
	MA, FÉRNANDO G	. •	82	Street Addre	ss (P.O. Box Number is Not Acceptable)	 	
	FAIRWEY DRIVE						# 1 # 4
MIAI	MI BEACH FL 33141	•	83				
			84	City	F	85 · Zip C	ode "
A Device of Control Co. 1 Co.							
office or r	registered agent, or both, in the State	e of Florida. Such change was author	orized by t	he corporation	's board of directors. I hereby accept the app	ointment as reg	istered
		alions of, Section 607,0000, Florida	Statutes.				
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: Reg	istered Agent	signature required			
12.	OFFICERS A	ND DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PVD	DELETE	1.1 TITLE			Change	Addition
NAME '	TALINA, I LINVANDO G.		1.2 NAME				
STREET ADDRESS			1.3 STREET		•	:	:-
CITY-ST-ZIP	MIAMI BEACH FL 33141	☐ DELETE	1,4 CITY-ST-	-ZIP		Change	Addition
TITLE .		DELETE	2.1 TITLE			Gridinge	
NAME			2.2 NAME 2.3 STREET	ADODESE		•	,
STREET ADDRESS			2.4 CITY-ST	1	;		ļ
CITY-ST-ZIP		DELETE	3.1 TITLE	1-21		Change	Addition
NAME	The state of the s	-	3.2 NAME	.			
STREET ADDRESS			3.3 STREET	ADDRESS	en e	3144	
CITY-ST-ZIP			3.4 CITY-ST	r-zip		1.1	
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4.2 NAME		· · · · · · · · · · · · · · · · · · ·		
STREET ADDRESS		4	4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST	-ZIP		☐ Change	Addition
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME ·					and the second s	•	* . 1
			5.2 NAME	ADDRESS		•	
STREET ADDRESS			5.3 STREET			,	
STREET ADDRESS CITY-ST-ZIP TITLE	. 新加工	☐ DELETE				Change	Addition

CITY-ST-ZIP 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 improved.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

FILED

Jan 28, 1999 8:00am

Secretary of State

01-28-1999 90054 024 ***150.00