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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P9600074437 (0)

FILED Mar 20 1998 8:00am Secretary of State

2000 E	NTERPRISES INC.			 	A Piğir Ölübü ildik alalı alalı
Principal Place	a of Rusinaca	Mailing Address			
Principal Place of Business		ŭ			
		9300 S. DIXIE HWY., STE MIAMI FL 33156	201		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		DO NOT WRITE IN THIS S	SPACE
				3. Date Incorporated or Qualified	
				09/09/1996	
_	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# ata	26 Suite, Apt. #, etc.		65-0747728	Not Applicable
22	#, 6 (c.	27 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		& Election Compaign Financia	·
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Žip	Country	Zip	Country	This corporation owes or has paid the cur	
24	25	29	30		Yes No
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registered	
GA'	YLE, MONICA		B1 Name		
	310 SW 21 ST.		82 Street A	Address (P.O. Box Number is Not Acceptable)	
MIA	MI FL 33175				
			83		
			84 City		85 Zip Code
				FL	
11. Pursuant t	to the provisions of Sections 607.0	502 and 607.1508, Florida Statute	es, the above-named	corporation submits this statement for the purpose of location's board of directors. I hereby accept the appli	changing its registered
agent I ar	m familiar with, and accept the obt	igations of Section 607.0505, Flo	rida Statutes.	orations board or directors. Thereby accept the app	Jillithent as registered
SIGNATURE					
	Signature Typod or printed name of registered :	·	Registered Agent signature		DIDECTOR
12.		ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND	
	D Gayle, monica	ב"ו מנונות	1.1 TITLE		☐ Change ☐ Addition
NAME PTREET APPROACO	13310 SW 21 ST.		1.2 NAME		
STREET ADDRESS	MIAMI FL 33175		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIMITE 33173	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME		- Deter-	2.2 NAME		C change C Modition
STREET ADORESS			4		:
· ·			2.3 STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		Change Rubition
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-S1-ZIP		
TITLE		DELETE	4 i Title		☐ Change ☐ Addition
NAME		<u> </u>	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE	ı	☐ DELĒTĒ	5.1 TITLE		☐ Change ☐ Addition
NAME		_	5.2 NAME	•	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		1
TITLE		DELETE	6.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			64 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 oport of 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.

CICMATUDE.

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