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

PROFIT CORPORATION **ANNUAL REPORT** 1998 DOCUMENT # SOUTHBEE, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000077257 (9)

FILED Mar 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					
1941 SW 8TH ST. 1941 SW 8TH ST.					
MIAMI FL 33135	MIAMI FL 33135	MIAMI FL 33135		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	nis srace
				09/17/1996	
2. Principal Place of Business	2a, Mailing Address			4. FEI Number	Applied For
21	26		65-0694876	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional	
22	27			5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
23	28		Trust Fund Contribution	Added to Fees	
Zip Country	Zip	ip Country		8. This corporation owes or has paid the	current year Intangible
24 25	29	30		Personal Property Tax due June 30.	☐ Yes ☐ No
g, Name and Address of Curren	t Registered Agent			10. Name and Address of New Regists	red Agent
(BONILLAM)GLORIA H.		1	81 Name		
1941 SW 8TH ST.		<u>-</u>	82 Street Add	ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33135		[ou con rad	need (1.0. Box Hamber is Not Need plants)	
		Ī	83		
& BONILLA		Į.	24 63		[01] 75 O. 45
DUNILLA		- 1'	B4 City	i	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607 050; office or registered agent, or both, in the State	2 and 607.1508, Florida Statu	ites, the ab	ove-named cor		
office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation	of Florida. Such change was	authorized	by the corpora	ition's board of directors. I hereby accept the	appointment as registered
	mona or, occitori doi .coob, i i	ionoa olalo	1103.		
SIGNATURE Signature, typed or printed name of registered age	it and trie if applicable (NO	TE Registered	Ageni s gnature requ	ired when reinstating) DA	
12. OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
TITLE PD	DELETE 1.1 TH		.E		Change Addition
NAME BONILLA, GLORIA H.		1.2 NAN	AE .		13
STREET ADDRESS 1941 SW 8TH ST.	1.3 ST		EET ADDRESS		}
CITY-ST-ZIP MIAMI FL	1.4 CIT		Y-ST-ZIP		3
TITLE V	DELETE 2.1 TIT		.E		Change Addition
NAME BONILLA, GLORIA H	A H 22 NA		ИE		
STREET ADDRESS 1941 SW 8TH ST.	1941 SW 8TH ST. 2.3 ST		EET ADDRESS		
CITY-ST-ZIP MIAMI FL 33135	MIAMI FL 33135 2.40		Y-ST-ZIP		
TITLE	DELETE 3.1 TI		.E		Change Addition
NAME		3.2 NAN	AE (
STREET ADDRESS		3.3 STR	EET ADDRESS		
CITY-ST-ZIP			Y-ST-ZIP		
TITLE	☐ DELETE	4.1 TiTL			Change Addition
NAME		4. 2 NA	ME I		1
STREET ADDRESS		4.3 STR	EET ADDRESS		
CITY-ST-ZIP			Y-ST-ZIP		
TITLE	DELETE	51 TITL			Change Addition
NAME		5.2 NAA	AF)]
STREET ADDRESS			EET ADDRESS		
CITY-ST-ZIP			Y-\$1-ZIP		
TITLE	DELETE	6.1 TITL		· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME		6.2 NAA	- 1	:	pump 1 2 gr hade 1 revived!
STREET ADDRESS			EET ADDRESS		
					İ
CITY-ST-ZIP 14. I hereby certify that the information supplied with	th this filing does not qualify t	for the exer	r-st-zip nption stated in	Section 119.07(3)(i), Florida Statutes. I furthe	er certify that the information
indicated on this annual report or supplementa	annual report is true and ac	curate and	that my signatu	ire shall have the same legal effect as if mad	e under oath: that I am an

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a 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.