

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

FILED
Mar 31 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000081496 (7)

1. Corporation Name

MIAMI TOOLS & SERVICES INC

Principal Place of Business

3450 NW 20 STREET
MIAMI FL 33142

Mailing Address

3450 NW 20 STREET
MIAMI FL 33142



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	4543 S.W. 75 AVE	26	4543 S.W. 75 AVE	10/02/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0699534	
City & State		City & State		Applied For	
23	MIAMI - FLA	28	MIAMI - FL	Not Applicable	
24	Zip 33155	29	Zip 33155	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
25	Country DARE	30	Country DARE	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

GONZALEZ, MARIA
3450 NW 20 STREET
MIAMI FL 33142

81	Name	GONZALEZ JUANES MARIA	
82	Street Address (P.O. Box Number is Not Acceptable)	10376 S.W. 9 TERR	
83			
84	City	FL	Zip Code 33174

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

Maria Gonzalez Torres MARIA GONZALEZ TORRES 3-19-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	PRESIDENT
NAME	GONZALEZ, MARIA	1.2 NAME	GONZALEZ JUANES, MARIA
STREET ADDRESS	3450 NW 20 STREET	1.3 STREET ADDRESS	10376 S.W. 9 TERR
CITY-ST-ZIP	MIAMI FL 33142	1.4 CITY-ST-ZIP	MIAMI - FLA 33174
TITLE		2.1 TITLE	VICE PRESIDENT
NAME		2.2 NAME	MANUEL L. J. TORRES
STREET ADDRESS		2.3 STREET ADDRESS	10376 S.W. 9 TERR
CITY-ST-ZIP		2.4 CITY-ST-ZIP	MIAMI - FLA 33174
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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.

SIGNATURE

Maria Gonzalez Torres 3-19-98 205-551-1446

CR2E034 (10/97)