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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000082148 (3)

M & V ENTERPRISE CORP.

4790 SW 75 AVE.

MIAMI FL 33155

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TATLE

NAME

Principal Place of Business Mailing Address 4790 SW 75 AVE. 4790 SW 75 AVE. MIAM! FL 33155 MIAMI FL 33155 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/04/1996 2. Principal Place of Business 2s. Mailing Address FEI Number Applied For 65-0700893 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zıp Country Country This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30.] Yes □ No 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MADERO, EDDY 4790 SW 75 AVE. 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33155** 83 84 City Zin Code 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 milit, any accept the obligations of, Section 607.0505. Florida Statutes. **SIGNATURE** (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE MADERO, EDDY NAME 1.2 NAME 4790 SW 75 AVE. STREET ADORESS 1.3 STREET ADDRESS **MIAMI FL 33155** 1.4 CITY-ST-ZIP CITY - ST - ZIP ☐ DELETE ☐ Change Addition TITLE 2.1 TITLE VAZQUEZ, MALENA NAME 22 NAME

4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 44 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP

2.3 STREET ADDRESS

3.3 STREET ADDRESS 3.4. CITY-ST-ZIP

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE 4. 2 NAME

DELETE

DELETE

☐ Change TITLE DELETE 6.1 TITLE Addition STREET ADDRESS 6.3 STREET ADDRESS

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Thereby 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:

Addition

Addition

Change

☐ Change

FILED

Apr 27 1998 8:00am

Secretary of State