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 # **P96000082374**

1. Corporation Name

Principal Place of Business		Mailing Address					
1180 WEST 33RD HIALEAH FL 33012		1180 WEST 33RD STREET HIALEAH FL 33012					
2. Principal Place	e of Business	2a. Mailing Address					
_ '		26					
1		20					
Suite, Apt. #,	etc.	Suite, Apt. #, etc.					
Suite, Apt. #,	etc.	Suite, Apt. #, etc.					
Suite, Apt. #,	etc.	Suite, Apt. #, etc.					
Suite, Apt. #,		Suite, Apt. #, etc. 27 City & State 28					
Suite, Apt. #,	etc. Country	Suite, Apt. #, etc. 27 City & State					

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90036 020 ***150.00



Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be

Added to Fees

□No

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

6. Election Campaign Financing

8. This corporation owes the current year Intangible Personal Property Tax.

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

10/01/1996 FEI Number

1180 WEST 33RD STREET HIALEAH FL 33012				2 Street Address (P.O. Box Number is Not Acceptable)					
			84	City		FL	85 Zip C	ode	
		007.4500. 51.44. 04-4.4-	<u> </u>				changing its	ragistered	
office or r	to the provisions of Sections 607.0502 and egistered agent, or both, in the State of Flo m familiar with, and accept the obligations	rida. Such change was autl	horized by t	he corpo	ration's board of directors. I hereby	accept the appoin	ntment as req	gistered	
SIGNATURE		le if an Early (NOTE: D.	naistored Agent	olonotum re	avired when reinstation)	DATE	·		
				storod Agent signature required when reinstating) DATE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	D OFFICERS AND BIT	DELETE	1,1 TITLE		ABBITOTOTATAGES	O OTT TOETO 7 II	Change	Addition	
	BACALLAO, ISABEL	C. 022272	1.2 NAME				_ `	_	
NAME	1180 WEST 33RD STREET		1.3 STREET	ADDDESS					
STREET ADDRESS	HIALEAH FL 33012			- 1				~ · · · ·	
C/TY-ST-ZIP	D	DELETE	1.4 CITY-ST 2.1 TITLE	- Z(P			Change	Addition	
TITLE	CAMPILLO, HILDA		2.1 TITLE						
NAME	1180 WEST 33RD STREET								
STREET ADDRESS			2.3 STREET	- 1	•				
CITY-ST-ZIP	HIALEAH FL 33012	□ DELETE	2.4 CITY-S	r-ZIP			Change	Addition	
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NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET		·				
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TITLE		☐ DELETE	4.1 TITLE				Change		
NAME			4.2 NAME			_			
STREET ADDRESS			4.3 STREET	ADDRESS					
CITY-ST-ZIP			4.4 CITY-ST	-ZIP					
TITLE		☐ DELETE	5.1 TITLE				☐ Change	☐ Addition	
NAME			5.2 NAME					ĺ	
STREET ADDRESS			5.3 STREET	ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST	- ZIP					
TITLE		☐ DELETE	6.1 TITLE				Change	Addition)	
NAME			6.2 NAME	ł				[
STREET ADDRESS			6.3 STREET	ADDRESS	Annual Control of the				
CITY-ST-ZIP			6.4 CITY-ST	- 1	,				
14. I hereby o	ertify that the information supplied with this	filing does not qualify for the	he exemption	on stated	in Section-119.07(3)(i), Florida Sta	tutes. I further cen	ify that the in	nformation	

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 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 empowered.