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

DOCUMENT # P96000082893 (4)

MAYDA'S TREASURE HUNT INC.

FILED
Jan 30 1998 8:00am
Secretary of State



District Discourt District			-{	0 300 0 140 400 0 100 0 101 00 0		
Principal Place of Bus	siness	Mailing Address				
2440 CORAL WAT		UIANI EL 22145				
- MIAMI FL 33145*					DO NOT WRITE IN T	HIS SPACE
					3. Date Incorporated or Qualified	
					10/08/1996	
2. Principal Place of	Business	2a, Mailuog Address		- 110	4. FEI Number	Applied For
ଆ <i>958</i> S	W B 2 Ave	26 958 S	W 8°	a Ave	65-0743768	Not Applicable
Suite, Apt. #, etc.	1 4 V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V V	Suite, Apt. #, etc.	<u> </u>	Y		\$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 MIQMI		28 [1]AMI			Trust Fund Contribution	Added to Fees
Zip	Country	32111	Couplry	'I	8. This corporation owes or has paid the	
24 35 44	25	29 33147 3	0 +	<u>L.</u>	Personal Property Tax due June 30.	Yes No
	ame and Address of Current	Registered Agent		1	10. Name and Address of New Registe	red Agent
SUAREZ, ALDO				Name		
4431 \$ W 150 CT			82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
MIAMI FL 33145						
			83			
			84	City		85 Zip Code
						FL S ZIP COOR
11. Pursuant to the p	rovisions of Sections 607.0502	and 607.1508, Florida Statutes	the above	e-named corpo	pration submits this statement for the purpo on's board of directors. I hereby accept the	se of changing its registered
agent. I am famili	ar with, and accept the obligati	ons of, Section 607.0505, Flori	da Statute	s.	on's board or directors. Thereby accept the	appointment as registered
SIGNATURE						
Signature.	typed or printed name of registered agent			ent signature requires		
12.	OFFICERS AND		13.	·····	ADDITIONS/CHANGES TO OFFICERS	
TITLE DPS		☐ DELETE	1.1 TITLE			Change Addition
446	AREZ, ALDO		1.2 NAME			
	1 SW 150 CT.		1.3 STRÉET	ADDRESS		
	MI FL 33185	T DELETE	1.4 CITY-S	IT-ZIP		The state of the s
TITLE DVT		DELETE	2.1 TITLE			Change Addition
446	AREZ, MAYDA		2.2 NAME			
	1 SW 150 CT.		2.3 STREET	ADDRESS	•	
	MI FL 33185	- Concern	2.4 CHY-	SI-7IP		
TITLE		☐ DELETE	3 1 TITLE	Ì		Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET			
CITY-ST-ZIP		Pritze	3.4. CITY-	ST-2IP		Observe Tables
TITLE		☐ DELET é	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET			
CITY-ST-ZIP			4.4 CITY - S	T-ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE		☐ DELET€	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP	<u> </u>		5.4 CITY - S	T-ZIP		
TITLE		☐ DELET é	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY-S			
14 I hereby cortify th	at the information supplied with	this filing does not qualify for t	the exemp	tion stated in S	Section 119 07(3)(i) Florida Statutes I furthe	or certify that the information

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.

1/22/00