## 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** 

## **FILED** May 05 1998 8:00am Secretary of State

			# P960 uters & cons								
Principal Place of Business Mailing Address							1 100 that it askin datta ann			#1 11841 B181 <b>8</b> 181	NO TOU LOST
9726 SW 147 CT					9726 SW 147 CT						
MIAMI FL 33196				MAM	MIAMI FL 33196			DO NOT WRIT	TE IN THIS	CDACE	
								3. Date Incorporated or Qualified			
								11/04/1996			
2. F	Principal P	lace of Busin	ness	2a. Mail	ing Address			4. FEI Number			plied For
21				26	26			65-0709259		<del> </del>	t Applicable
5	Suite, Apt.	#, etc.		Suite	Suite, Apt. #, etc.			5. Certificate of Status Desired	57	\$8.75	
22				27				S. Obtinicate of oldies positos		Fee Re	<u> </u>
_	City & State			— ·	City & State			6. Election Campaign Financing		\$5.00	
23	Žip	Country		. [28] Zip	Zip Country			Trust Fund Contribution		Added to	
24	- 10-7	25		29	}			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No			
241	<del></del>	9. Name	and Address of Cui			30]		10. Name and Address of New R			
	AL.	VAREZ. AL	BERTO			81	Name				
9726 SW 147 CT					82	Street Addre	ess (P.O. Box Number is Not Accepta	able)			
MIAMI FL 33196						Dirodi Addit	SSS (1:0: Box Manibol 13 Not Accopite	2010)			
						83					
						84	City			85 Zip C	Code
<u> </u>									FL		
	Pursuant office or r agent. I a NATURE	registered aç ım familiar w	gent, or both, in the St ith, and accept the of	tate of Florida. Subligations of, Sec	uch change was a tion 607.0505, Flo	uthorized by rida Statutes	the corporation	oration submits this statement for the on's board of directors. I hereby according to the on's board of directors.	ept the app	i changing its jointment as i	registered registered
		Signature, typed	or profed name of registered				int signature require	od when reinstating)	DATE	- DECTOR	
12.		D	OFFICERS	AND DIRECTOR	S DELETE	13.	<del> </del>	ADDITIONS/CHANGES TO OFF	ICERS AND	Change	S IN 12 Addition
NAME			z, alberto		where	1.2 NAME				Onlingo	
	ET ADDRESS		W 147 CT			1.3 STREET	ADDRESS			•	
	ST-ZIP		FL 33196			1.4 CITY-S					
TITLE		D			DELETE	2.1 TITLE				Change	Addition
NAME	.	ALVARE	Z, ANA G								
STREE	ET ADDRESS	9726 S	W 147 CT								
CITY-	ST-ZIP	MIAMI F	FI 33108			2.3 STREET	ADDRESS				
TITLE			E 00 100			2.3 STREET 2.4 CITY - S					
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I hereby certify that the information supplied with this filing does not quality or the exemption stated in Section 119.07(3)(), Florida Statutes, I further certify that the informatic indicated on this annual report or supplemental annual report is true and courate 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.