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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 30 1998 8:00am Secretary of State

	1998 DIVISION OF CORPORATIONS				Secretary of State	
	MENT # P9600 ELO & ODALYS FASHIONS	00091748 (9)				
					1 (10) (10) (10) (10) (10) (10) (10) (10	A A
Principal Plac	ce of Business	Mailing Address				(812)
2104 NW 20TH STREET 2104 NW 20TH STREET						
MIAMI FL 33142 MIAMI FL 33142					DO NOT WRITE IN THI	O CDA OF
					3. Date Incorporated or Qualified	S SPACE
					11/07/1996	
<u> </u>	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0487226	Not Applicable \$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May 8e	
Zip Country		ZIP Country		Trust Fund Contribution	Added to Fees	
24	25	}	30		 This corporation owes or has paid the of Personal Property Tax due June 30. 	Yes No
	9. Name and Address of Curre				10. Name and Address of New Registers	d Agent
	PEZ, MARCELO		81	Name		
2104 NW 20TH STREET			82	82 Street Address (P.O. Box Number is Not Acceptable)		
MIN	AMI FL 33142		83			
			_	· · · ·		Ja-1 7: 0 i
			84	City	F	
11. Pursuant office or r	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute e of Florida Such change was a	s, the abov	e-named cor	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, Flor	rida Statute	S.	and a second of the second of	sportunett, as regionate
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable (NOTE	Registered Age	ent signature requ	ured when reinstating) DATE	
12.	OFFICERS AT	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D LODGE MADOS O	LOPEZ, MARCELO				☐ Change ☐ Addition
NAME	2104 NW 20TH STREET					
STREET ADDRESS	18111 FL 00440		1.3 STREET			i
CITY-ST-ZIP TITLE	MICHAEL CONTE	DELETE 2.1		1-212		Change Addition
NAME			2.2 NAME			
STREET ADDRESS	NESS .		2.3 STREET	ADDRESS	•	
CITY-ST-ZIP			2. 4 City-St-ZiP			
TITLE	☐ DELETE		3.1 TITLE			☐ Change ☐ Addition
NAME STREET ADDRESS			3.2 NAME 3.3 STREET	ADOBECC		
CITY-ST-ZIP			3.4. CITY-5			
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME	1		
STREET ADDRESS	i		4.3 STREET	ADDRESS		
CITY-ST-ZIP				T-ZIP		Change Laddit
TITLE NAME		L Utiltit	5 1 TITLE 5 2 NAME			Change Addition
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-S			
TITLE			6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP	partify that the information cumuliards	with this filling does not qualify for	6.4 CITY - S		Section 119.07(3)(i), Florida Statutes. I further	portific that the information
THE THOUSE	νοινης πιακτικό πικοπηματίου δυρρίθου ν	min this ming does not quality for	THE EXEMP	いいいうははせひげし	เ ของแบบ	zermy macine 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 suppliemental 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 busiese 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 attaching with an address.

CIONATURE, VIALENCE INC. 1996