PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90114 049 ***258.75

DOCUMENT

1. Corporation	AN GUESTHOUSE INC.	UU92024								
Principal Place of Business Mailing Address						·	4 51 44 51 110 1044 3 441 3 014 5 1			(1831 BIBI 1881
721 MICHIGAN AVENUE 721 MICHIGAN AVENUE MIAMI BEACH FL 33139 MIAMI BEACH FL 33139					DO NOT WRITE IN THIS SPACE					
							3. Date Incorporated or Qualifed			_
1							11/07/1996			
2. Principal P	lace of Business	2a. Mailing Addres	2a. Mailing Address				4. FEI Number		<u> </u>	olied For
21		26					65-0726464			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5. Certificate of Status Desired Status Desired Fee Required			
City & State City & State 23 28							Election Campaign Financing Trust Fund Contribution		\$5.00 i Added to	
Zip					try		8. This corporation owes the curr	ent year In	tangible	
24	25	29	30				Personal Property Tax.		Yes	□No
9. Name and Address of Current Registered Agent							10. Name and Address of New F	Registered	Agent	
				1	31 Name	•				
MEJIAS, CARLOS				-	32 Street	Address	s (P.O. Box Number is Not Accepta	ahle)		
721 MICHIGAN AVENUE				.	oz Sireei	i Address	S (F.O. BOX Nulliber is Not Accept	abley		
MIAMI BEACH FL 33139				1	33					
,				8	34 City			FL	85 Zip C	ode
office or r agent. I a	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change	e was auเก	onzea i	by the corp	d corpora poration's	ation submits this statement for the s board of directors. I hereby accep	purpose of of the appoi	changing its introduced the control of the control	registered jistered
SIGNATURE	Signature, typed or printed name 9 registered :	gent and title if applicable.	(NOTE: Re	gistered A	gent signature	required w	hen reinstating)	2 (O)	134	
12.	OFFICERS	AND DIRECTORS		13.			ADDITIONS/CHANGES TO OF	FICERS AI	ND DIRECTO	RS IN 12
TITLE	PVST	☐ DEL	☐ DELETE		1.1 TITLE				☐ Change	☐ Additio
NAME	MEJIAS, CARLOS			1.2 NAM	IE .					
STREET ADDRESS 721 MICHIGAN AVENUE				1.3 STREET ADDRESS		3				
CITY-ST-ZIP	MIAMI BEACH FL 33139	•		1.4 CITY	-ST-ZIP					
\$-711-01-EII						1			Change	☐ Additio

S IN 12 ☐ Addition ☐ Addition TITLE □ DELETE 2.1 TITLE **MEJIAS. CARLOS** NAME 2.3 STREET ADDRESS STREET ADDRESS 721 MICHIGAN AVENUE MIAMI BEACH FL 33139 CITY-ST-ZIP 2.4 CITY-ST-ZIP-Addition ☐ DELETE Change 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change ☐ Addition ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

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, with all other like empowered.

CITY-ST-ZIP

CR2E034 (11/98)