SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000093420 (3)

Principal Place of Bus iness	Mailing Address
17970 SW 152 AVE.	P.O. BOX 971507
MIAMI FL 33187	MIAMI FL 33197

FILED Oct 15 1998 8:00am Secretary of State

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41,771 12 2010						DO NOT WRITE IN THIS SPACE							
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2. Principal F	Place of Busi	ness	2a, Mailing	Address				4. FEI Num			ļ	Applied For	_
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Suite, Apt.	. #, etc.		}a	Apt. #, etc.				5. Certificat	te of Status Desired		• -	5 Additional Required	
City & Star			27 City & 5	State				A F1					\dashv
23	ile		28	Siale				I .	Campaign Financing nd Contribution			DO May Be ed to Fees	
Zip		Country	Zip		Cou	intry			poration owes or has	naid the cu			\dashv
24		25	29		30	,			Property Tax due Ju	· .	Yes	No	
	9. Name	and Address of Curre		gent	1001	Τ			nd Address of New		Agent		┪
SIU.	JAVIER E					81	Name	···					7
	0 SW 108T	H AVE.				82	Street Address	es (P.O. Roy N	lumber is Not Accept	ahla)			\dashv
	MI FL 3316						Street Addres	55 (r .O. DOX 1	dumper is 1400 Accept	able)			
}						83	1210	011	14 10016	1 4./*	Pul.		7
						84	1319 City	DHW_	19NACHE	HYC			
						04	COML	GA bl	15	FL	_ 85 3	Zip Code 23146	
office or	registered a	sions of sections 607.05 gent, or both, in the Sta with, and accept the obli	ile of Florida. Such	change was a	authorized	d by :	named corporation	ation submits the	nis statement for the prectors. I hereby acce	urpose of c pt the appo	hanging its intment a	s registered s registered	
SIGNATURE		,	g		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								1
SIGNATORE		or printed name of registered by	pent and title if applicable	(NC		red Ag	gent signature require			DATE			_];
12.		OFFICERS A	AND DIRECTORS		13.			ADDITION	NS/CHANGES TO OF	FICERS A	ND DIREC	CTORS IN 12	4
TITLE	DP	FD F	l	DELETE	1.1 10						Chan	ge Addition	۱ [
NAME	SIU, JAVI				1.2 NA		}						
STREET ADDRESS		108TH AVE.					ADDRESS				ě		
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NAME	619619		O AVE		2.2 NA								
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CITY-ST-ZIP	COYNL	BADGE, F	(33176	<u> </u>	2.4 CI		ZIP			· · · · · · · · · · · · · · · · · · ·		<u> </u>	
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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 effective method of the corporation of the receiver of 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 effective method of the corporation of th