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FILED
Jun 09 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Wortham
Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT #

1. Corporation Name

P96000096901 (9)

Principal Place of Business

15649 N. Kendall Drive
Miami, FL 33196

Mailing Address

15649 N. Kendall Drive
Miami, FL 33196

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

CANALES, PEDRO F.
1341 SW 124th COURT STE. 4-F
MIAMI, FL 33184

DO NOT WRITE IN THIS SPACE
3. Date Incorporated or Qualified

12/02/1996

4. FTT Number

65-0713279

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30

☐

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name

DE LA PORTILLA, MARIA

82 Street Address (P.O. Box Number is Not Acceptable)

5351 SW 154 PLACE

83

84 City

MIAMI

FL

85

Zip Code

33185

11. Pursuant to the provisions of Sections 607.0102 and 607.1501, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the responsibilities of Section 607.0105, Florida Statutes.

SIGNATURE

(Not a Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PVST	☒ DELETE
NAME	CANALES, PEDRO F.	
STREET ADDRESS	1341 SW 124TH COURT STE. 4-F	
CITY-ST-ZIP	MIAMI, FL 33184	
TITLE	D	☐ DELETE
NAME	DE LA PORTILLA, MARIA	
STREET ADDRESS	5351 SW 154 PLACE	
CITY-ST-ZIP	MIAMI, FL 33185	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	PVST	☒ Change ☐ Addition
12 NAME	DE LA PORTILLA, MARIA	
13 STREET ADDRESS	5351 SW 154 PLACE	
14 CITY-ST-ZIP	MIAMI, FL 33185	☐ Change ☐ Addition
21 TITLE		
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		☐ Change ☐ Addition
31 TITLE		
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		☐ Change ☐ Addition
41 TITLE		
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		☐ Change ☐ Addition
51 TITLE		
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		☐ Change ☐ Addition
61 TITLE		
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

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***150.00

14. I hereby certify that the information supplied with this form does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this annual report or supplementary statement 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 holder of a power of attorney to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an attached statement.

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)