PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P96000097966 1. Corporation Name

FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90030 014 ***150.00

Principal Place of Business Mailing Address 11790 SW/6 ST. STE. 509 MIAMI FL/3975 MIAMI FL/3975 MIAMI FL/3975 MIAMI FL/3975 MIAMI FL/3975 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/QH/1996 2. Principal Place of Business 21
MIAMI FL 39175 MIAMI FL 39175 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/QV4/1996 2. Principal Place of Business 21
2. Principal Place of Business 2. Principal Place of Business 3. Date Incorporated or Qualified 12/04/1996 2. Principal Place of Business 3. Date Incorporated or Qualified 12/04/1996 4. FEI Number 65-0711402 5. Certificate of Status Desired Suite, Apt. #, etc. 5. Certificate of Status Desired City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 2. Discorporation owes the current year Intagglister 2. Discorporation owes the current year Intagglister 2. Discorporation owes the current year Intagglister 3. Name and Address of Current Registered Agent 8. This corporation owes the current year Intagglister 9. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent 8. Street Address (P.O. Box Number is Not Acceptable) 8. This corporation owes the current year Intagglister 9. Name and Address of New Registered Agent 8. Name and Address of New Registered Agent 8. Name and Address of New Registered Agent 8. Street Address (P.O. Box Number is Not Acceptable) 8. This corporation is the current year Intagglister 9. Name and Address of New Registered Agent 8. Name and Address of New Registered Agent 8. Name and Address of New Registered Agent 8. Street Address (P.O. Box Number is Not Acceptable) 8. This corporation is not not integrited agent of 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, in 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, in the corporation when reinstating) 8. This corporation of the purpose of changing its registered agent of the purpose of registered agent of registered agent and the replication. (NOTE Register) 8. Name
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Suite, Apt. #, etc.
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City & State
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Zip Country Zip Country Zip Country B8. This corporation owes the current year Intangible Personal Property Tax.
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RODRIGUEZ, MARIO A 11790 SW 18 ST., STE. 509 MIAMI FL 33175 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PTS RODRIGUEZ, MARIO A 11790 SW 18 ST., STE. 509 MIAMI FL 33175 DELETE 1.1 TITLE DELETE 2.1 TITLE DELETE 2.1 TITLE DELETE 2.1 TITLE DELETE 2.1 TITLE Change Addition
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6.4 CITY-ST-ZIP 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF