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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000100900 (5)

FILED Jan 22 1998 8:00am Secretary of State

DALANI) SUNSET HAVESTIMENTS	, INO				
Principal Place	of Business	Mailing Address			t idbijade ija ibnib Binia dbini dbidi ndini dbidi ndini dbini beni dbis idbi	
9688 SW 24 ST 9688 SW 24 ST						
MIAMI FL 331	65	MIAMI FL 33165			DO NOT WRITE IN THIS SPACE	
US		US			3. Date Incorporated or Qualified	
					12/13/1996	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number 65-0722 937 Applied For	
21 26		├ ┐	n		APPLIED FOR Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			S8 75 Additional	
22 27		27			5. Certificate of Status Desired Fee Required	
City & State	•	City & State	City & State		6. Election Campaign Financing \$5.00 May Be	
23	28			Trust Fund Contribution Added to Fees		
Zip	Country Zip C		Coun	-	8. This corporation owes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30. X Yes No. No. Name and Address of New Registered Agent	
-	9. Name and Address of Curr	ent Registered Agent		rood	10. Name and Address of New Registered Agent	
CORDERO, ANA D				ANA D		
2801 PONCE DE LEON BLVD.			ε		et Address (P.O. Box Number is Not Acceptable)	
SUITE 810			_			
CO	RAL GABLES FL 33134		l e	3		
			ε	4 City_	MIAMI FL 85 Zip Code 3	
				81	MIAM / FL 85 Zip Code 3 3 1 7 3 ed corporation submits this statement for the purpose of changing its registered	
office or re agent. I as SIGNATURE	agistered agent, or both, in the Sta m familiar with, and accept the obl Signature, typed or printed name of registered of	te of Florida. Such change was igations of, Section 607.0505, F	authorized Iorida Statu	by the corp es.	orporation's board of directors. Thereby accept the appointment as registered	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 TITL	Ē	Change Addition	
NAME	VALDES, DANIEL R		1.2 NAM	E		
STREET ADDRESS	9755 SW 62 ST		1.3 \$TR	E1 ADDRESS	\$	
CITY-ST-ZIP	MIAMI FL		1.4 CITY	- ST- ZIP		
TITLE	VP	☐ DELETE	2.1 THTL	E	Change Addition	
NAME	valdes, daniel f		2.2 NAM	E		
STREET ADDRESS	6130 SW 93 CT		2.3 STR	ET ADDRESS	\$	
CITY-ST-ZIP	MIAMI FL			7-ST-7IP		
TITLE	8	☐ DELETE	3.1 TITL	E	S Change Addition	
NAME	CORDERO, ANA DIAZ		3.2 NAN		CORLEGO, AND DIAZ Change Addition 6425 S.W. 93 PLACE	
STREET ADDRESS	2801 PONCE DE LEON BLY	/D, STE 810		ET ADDRESS	MIAM/ FL. 33173	
CITY-ST-ZIP	CORAL GABLES FL	T BOLFF		r-ST-ZIP	Change Addition	
TITLE	1	☐ DELETE	4 1 TiTL		Unange Addition	
NAME	DIAZ, ALEJANDRO		4 2 NA			
STREET ADDRESS	13954 SW 38 ST			ET ADDRESS	S	
CITY-ST-ZIP	MIAIMI FL	DELETE		-ST-ZIP	Change Addition	
TITLE			51 THL		Change Addition	
NAME			5.2 NAN			
STREET ADDRESS				ET ADDRESS	5	
CITY-ST-ZIP		DELETE		'- ST - ZIP	Change Addition	
TATLE		[_] DETER	6.1 TITL			
NAME			6.2 NAN			
STREET ADDRESS				EET ADDRESS	5	
CITY-ST-ZIP		with this films of one of smalls.	6.4 CITY	-ST-ZIP	ated in Section 110 07(3)(i) Florida Statutes I further certifu that the information	
indicated	on this annual report or supplemen	man and ming does not quality of all annual report is true and ac	curate and	that my sig	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 truster empowered to execute this report as required by Chapter 607, Florida Statutes; an Block 12 or Block 13 if changed, or on hin attachment withyan address.