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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED May 27 1998 8:00am Secretary of State

	1998		1000	DIVISIO	N OF CORPOR	RATIC	ONS		י נ			
DOCUMENT # PAKX (X) (X) (X) (X) (X) (X) (X) (X) (X) (X												
Principal Plac	ce of Busines											
6736 CROOKED Palm torr. Same.												
MIANI LAKES, FL 33014-2198								DO NOT WRITE IN T	HIS SP	PACE		
FIRMI ANKOS, PLOSINU _JIUP)								3. Date Incorporated or Qualified 01-16-97				
2. Principal Place of Business			 -	2a. Mailing Address 26				4. FEI Number 65 0720090			plied For t Applicable	
Suite, Apt. #, etc.				Suste, Apt. #, etc. 27				5. Certificate of Status Desired		\$8.75 A Fee Rei		
City & State				City & State				6. Election Campaign Financing		\$5.00		
7io	Zip Country			Zip Country				Trust Fund Contribution		Added to		
24	25			20				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
g. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent				
JOSE LUIG CANO						81	Name					
							82 Street Address (P.O. Box Number is Not Acceptable)					
6736 CROOKED Palm torr.												
Miami Fl 33014-2198						24	63	· · · · · · · · · · · · · · · · · · ·	···			
		_				84	City		FLI	85 Zip C		
11. Pursuant office or ragent. La	to the provis registered aç am f am iliar w	ions of Socio pent, or bolds i ith, and accep	ns/607.0502 an nythe State of I at the obligation	d 607,1508, Florida Iorida: Such change s of, Section 607,05	Statutes, the a was authorize 05, Florida Sta	bove d by lutes	e-named co the corpor	rporation submits this statement for the purpo- ation's board of directors. I hereby accept the	se of cl appoir	hanging its itment as r	registered egistered	
SIGNATURE 4			A LA- Trougstweet agent airii	1				uirod when reinstating) DA				
12.	Orginal de la lipier		ICERS AND DE		13.	yea	or aignature req	ADDITIONS/CHANGES TO OFFICERS	AND C	DIRECTORS	3 IN 12	
TOLE	PP	ESIDE	NT	☐ DELF		TLE				Change	Addition	
NAME	Jo.	SE LU	15 0 A	V0 .	1.2 N	AME						
STREET ADDRESS	NAME JOSE LUIS O STREET ADDRESS 6736 CCOOKED OITY-ST-ZIP MIAMI-FI			alm terr	In terr, 1.3 STRIET							
CITY-ST-ZIP	Mi	ami-	F/ 3	014	140	1Y-\$1	- 7IF*					
TITLE				☐ DELE	TE 21 TI	īLĒ] Change	Addition (
NAME	l				2.2 N	AME					Ī	

STREET ADORESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - \$1 - ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-\$1-ZIP 3.4 CITY- \$1-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP 0000025381**810**hange -05/28/98--01013--036 DELETE TITLE 5.1 TITLE NAME 52 NAME ***158.75 STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5.4 CiTY-ST-ZIP DELETE TITLE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS CITY-ST-ZIP 6.4 C/1Y - S1 - Z/P

14. Thereby 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 supplied entity that I am an officer or director of the corporation of the recover of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attrocurrent with an address.