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

P97000007808 (3) DOCUMENT #

1, Corporation Name

FILED Mar 02 1998 8:00am Secretary of State

BATISTA	A CORPORATION				
Principal Place of Business Mailing Address				1 1001/001 (ED 101): EBET: ORIS ONIS DOIS DOS	
328 CRANDON BLVD #109 328 CRANDON BLVD #109			09		
KEY BISCAYNE FL KEY BISCAYNE FL				DO NOT WRITE IN THIS	ODACE .
				3. Date Incorporated or Qualified	SPACE
				01/21/1997	·
2. Principal Pla	ice of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number	Applied For
21		26		65-0726660	Not Applicable
Suite, Apt, #	, etc.	Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	T	\$8.75 Additional
22 City & Canto		27		5. Certificate of Status Desired	Fee Required
I City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Ζiρ	Country	8. This corporation owes or has paid the cur	rrent year Intangible
24	25		30]		Yes No
	9. Name and Address of Curre	int Registered Agent	541	10. Name and Address of New Registered	Agent
BATISTA, EDWARD B1 Na					
328 CRANDON BLVD #109			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
KEY BISCAYNE FL			h-1	· · · · · · · · · · · · · · · · · · ·	
			83		
			B4 City		85 Zip Code
<u>.</u>				FL	.
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 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 obligations of, Section 607.0505, Florida Statutes.					
agent. I an	familiar with, and accept the oblig	gations of, Section 607.0505, Flor	orida Statutes.	7 7	5-98
SIGNATURE _		- EDWARD BAT!			5 · M
12.	Ignature: typed or printed name of registered ag OFFICE DC: AN	yent and title II applicable (NOTE ND DIRECTORS	Registered Agent signature requi	ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIDECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OTTICERS AND	Change Addition
NAME	BATISTA, EDWARD		1.2 NAME		
STREET ADDRESS	328 CRANDON BLVD #109		1.3 STREET ADDRESS		
CITY-ST-ZIP	KEY BISCAYNE FL		1.4 CITY-ST-ZIP		ļ
TITLE		DELETÉ	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADORESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		1
TITLE		☐ DELETÉ	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		}
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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 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.