5-598 B. 6493 -C. FILE NOW: FILING FEE AFTER MAY 1ST IS &

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMUST OF GLUT

FILED

May 05 1998 8:00am

Secretary of State

205-571-1860

Sandra B. Morib

Secretary of State

DIVISION OF CORPORATIONS

1998
DOCUMENT #

STREET ADDRESS

SIGNATURE:

P97000013068 (6)

VIDAL & DEZENDEGUI DEVELOPMENT, INC.

Principal Place	e of Business	Mailing Address			
167 N.E. 39TH ST. 167 N.E. 39TH ST.					
MIAMI FL 3313	37	MIAMI FL 33137			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					02/10/1997
6 Principal Pl	ace of Rusiness	2a. Mailing Address	-		- FEIN
					65-0733848 Applied For Not Applied
Suite, Apt. #, etc.		Suite, Apt. #, etc.			SR 75 Additional
22	#, 8 (C.	27			5. Certificate of Status Desired \$8.75 Additional Fee Regulred
City & State	2	City & State			6. Election Campaign Financing \$5.00 May Be
3	-	28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Coun	irv	8. This corporation owes or has paid the current year Intangible
24	25	29	30	- •	Personal Property Tax due June 30. Yes No
	g. Name and Address of Curre		1001		10. Name and Address of New Registered Agent
AVE	ELLAN, LILIANA V ESQ.			Na Na	Name
			<u> </u>		
	ALCAZAR AVE.		4	32 Str	Street Address (P.O. Box Number is Not Acceptable)
	TE 302		- -	33	
CO	RAL GABLES FL 33134				
			Ī	54 Cit	City E 85 Zip Code
					named corporation submits this statement for the purpose of changing its registere
12.	Signature, typed or printed name of registered ag OFFICERS AN	AD DIRECTORS	13.	-Osur sidi	(signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITL	.F	Change Additi
NAME	VIDAL, HENRY ADAMS		1.2 NAN	AE.	
STREET ADDRESS	167 N.E. 39TH ST.		1.3 STR	EET ADDR	DORESS
CITY-ST-ZIP	MIAMI FL 33137			Y-ST-ZIP	
TITLE	D	DELETE	2 1 TITL		Change Additi
NAME	DEZENDEGUI, GUSTAVO		2.2 NAA	AE.	
STREET ADORESS	167 N.E. 39TH ST.		2.3 STR	EET ADOR	DORESS
CITY-ST-ZIP	MIAMI FL 33137			Y-ST-ZIF	
TITLE		☐ DELETE	3.1 TITL		☐ Change ☐ Addits
NAME			3.2 NAA	AE	
STREET ADDRESS			3.3 STR	EET ADDR	DDRESS
City-St-ZIP			3.4. CIT	Y-ST-ZIF	- ZIP
TITLE		☐ DELETE	4.1 TITE	.E	Change Addition
NAME			4. 2 NA	ME	
STREET ADDRESS			4.3 STR	EET ADDR	DORESS
CITY-S1-2IP			4.4 CIT	Y - ST - ZIP	
TITLE		☐ DELETE	5.1 TITL	£	Change Additi
NAME			5.2 NAA	AE	
STREET ADDRESS			5.3 STR	EET ADDF	DORESS
CITY-ST-ZIP			5.4 CiT	Y - ST - ZIP	- ZIP
TITLE		DELETE	6.1 TITL	.E	Change Addition
NAME			62 NA	.ac	

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.