## 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 # P97000013188 (2)

A PERFECT PRINTABLE, INC.

## FILED May 13 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Add	Mailing Address			1 1981/1981 119 1911/1 491/1 491/1 981/1 981/1 981/1 981/1 191/1 191/1 191/1 191/1 191/1 191/1 191/1 191/1 191/1		
14232 S.W. 97	TH TERRACE	14232 S.W.	14232 S.W. 97TH TERRACE					
MIAMI FL 33186		MIAMI FL 33	MIAMI FL 33186			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						02/10/1997		
2. Principal Pl	ace of Business	2a. Mailing A	ddress			4. FEI Number	Applied For	
21		26				65-0736000	Not Applicable	
Sulte, Apt.	#. etc.	Suite, Ap	l. #, etc.				\$8.75 Additional	
22		27				5. Certificate of Status Desired LJ	Fee Required	
City & State	9		City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28				Trust Fund Contribution	Added to Fees	
Zip	Country	Ζφ		Country		8. This corporation owes or has paid the c	urrent year Intangible	
24	25	29	30	<u> </u>		Personal Property Tax due June 30.	Yes No	
	9. Name and Address of 0	Current Registered Age	nt			10. Name and Address of New Registered	d Agent	
SCH	HWARTZMAN, SUSAN			81	Name			
	32 S.W. 97TH TERRACE			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
MIA	MI FL 33186			-				
				83				
				84	City		85 Zip Code	
						F		
fice or to	egi <b>ste</b> red agent, or both, in the	∍State of Florida, Such r	hange was auth	arized by	the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	or changing its registered	
agent La	m familiar with, and accept the	e obligations of, Section (	60 <b>7.0</b> 5 <b>0</b> 5, Florida	s Statutes	i. '			
SIGNATURE						ured when reinstating) DATE		
12.	Signature, typind or printed name of regist CFE (CCF)	RS AND DIRECTORS	[NOTE Re	13.	int eighature red	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12	
TITLE	Ď	L. PARTO DATA OTORIO	DELETE	1.1 TITLE			☐ Change ☐ Addition	
NAME	SCHWARTZMAN, SUSAI	 N	-	1.2 NAME				
STREET ADDRESS	14232 S.W. 97TH TERR			1,3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33186	102		1.4 CITY-S				
TITLE	WIN THE COTOO	T	DÉLETE	2.1 TITLE	-		Change Addition	
NAME				2.2 NAME				
STREET ADDRESS				2.3 STREET	ADDRESS			
CITY-ST-ZIP				2. 4 CITY - S	ST-ZIP			
TITLE			DELETE	3.1 TITLE			Change Addition	
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY-ST-ZIP			- 1	3.4. CITY - 5	ST-ZIP			
TITLE			DELETE	4.1 TITLE			☐ Change ☐ Addition	
NAME			1	4. 2 NAME				
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				44 CHTY-S	T - ZIP			
TITLE			, DELETE	51 TITLE			Change Addition	
NAME			1	52 NAME				
STREET ADDRESS			1	53 STREET	ADDRESS			
CITY-ST-ZIP				54 CITY-S	T- ZIP			
TITLE			DELETE	6 1 7/TL <del>l</del>		<u> </u>	Change Addition	
NAME			1	62 NAME				
STREET ADORESS				63 STREET	ADDRESS		•	
CITY-ST-ZIP				6.4 CITY - S	1 - ZIP	Out 440 07/0/() Finish Chat do 15 observed		

4. 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 informatio 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 reconsiver 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.

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AN/1391998

305-386-9878