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

	MENT # P97000 E E SAPORITO INC.	0013360 (7)		
Principal Plac	e of Business	Mailing Address		
1905 N. ATLANTIC BLVD.		1905 N. ATLANTIC BLVD.		
APT 15C		APT 15C		
FT LAUDERDALE FL 33305		FT LAUDERDALE FL 33305		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 02/10/1997
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For Not Applicable
Sulte. Apt. #. etc.		26		
F		Suite, Apt. #, etc.		5. Certificate of Status Desired See Required
City & State		City & State		
23	G	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	This corporation owes or has paid the current year Intangible
24	25	<u>├</u> ~~ `	30	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current			10. Name and Address of New Registered Agent
, PA	STURA, CARLA		81 Name	
1 1006 M ATLANTIC PLAT			Address (P.O. Box Number is Not Acceptable)	
APT 15C			Joe Oliver	Address (1.5. Box Hamber is Not Acceptable)
∗ P0	POMPANO BEACH FL 33305			
·] ,			84 City	85 Zip Code
				FL
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. Signature, typod or pointed name of registered agent and title it applicable. (NOTE, Registered Agent signature required when reinstating) DATE				
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELET E	1.1 TITLE	Change Addition
NAME	PASTURA, CARLA		1.2 NAME	
STREET ADDRESS	1905 N. ATLANTIC BLVD.		1.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33305		1.4 City-St-ZIP	
TITLE		☐ DELET E	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP		T DELETE	2. 4 CITY - S1 - ZIP	
TITLE		☐ DELETE	3.1 TITLE	[_] Change [_] Addition
NAME			32 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP		DELETÉ	3.4. CITY - ST - ZIP	Change Addition
TOTLE		רובו נ	4.1 TITLE	Change La Adouble
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	Change Addition
NAME			5.2 NAME	Change C Hounter
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY - ST - ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		 -	62 NAME	
PTREET AODDECC			es crocci apporce	

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 trustoer impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 i changed, or on in utilachment with an indiress.

FILED

May 05 1998 8:00am

Secretary of State