## 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

1.	Corporatio		# P9 DNAL, INC		715596	(4)						
Pr	Principal Place of Business Mailing Address									a naantaan tsa sansi sabis aatis abisi aanti aatisi ahisi sidat astan attisa sasisk dist sabi		
2899 SO. BAYSHORE DR. FIFTH FLOOR					2699 SO. BAYSHORE DR. FIFTH FLOOR							
MIAMI FL 33133					MIAMI FL 33133					DO NOT WRITE IN THIS SPACE		
										3. Date Incorporated or Qualified		
Ļ	O incinal D	U								02/18/1997		
	Principal P	Principal Place of Business			2a. Mailing Address					4. FEI Number   Applied For	_	
21	Suite, Apt. #. etc.				Suite, Apt. #, etc.					Not Applical	Эle	
22	Guid, Apr. #, 4to.			ŀ	27					5. Certificate of Status Desired See Required Fee Required		
	City & State				City & State					6. Election Campaign Financing \$5.00 May Be		
23				ļ,	28					Trust Fund Contribution Added to Fees		
	Zip	Country			Zip		Country			8. This corporation owes or has paid the current year Intangible		
24	25		]	29 30		30			Personal Property Tax due June 30.  Yes X No			
9. Name and Address of Current Registered Agent										10. Name and Address of New Registered Agent		
	FARRA, MIGUEL G						81	N	ame			
	2699 <b>Ş</b> O. Bayshore Dr.			•				S	reet Addre	fress (P.O. Box Number is Not Acceptable)		
FIFTH FLOOR												
	MIA	VMI FL 331	33				63			•		
							84	С	ity	FL 85 Zip Code		
١.,	Durement	to the provin	ione of Section	an 607 0502 or	nd 607 1609 Elos	ido Ptatuto	s the above		mod core		-d	
<b> </b> ''	office or r agent. I a	egistered ag m <b>lam</b> iliar w	gent, or both, i ith, and accep	n the State of F If the obligation	Florida Such cha ns of, Section 607	nge was at 7.0505, Flor	uthorized by rida Statutes	/ the	: corporati	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	i	
SI	GNATURE	Stonature typed	Lor original name of	registered agent an	ut tilu: if annhoable	INOTE	Registered Age	ent sa	noature rect. ure	ared when reinstating) DATE		
12		2.0.0.0.0,000		ICERS AND D		1110.12	13.		platate require	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TIT		Ď				ELETE	1.1 TITLE			☐ Change ☐ Additi	on	
NA:	VAME CADAVID, MANUEL VICTOR			VICTOR	1.2				}			
STI	STREET ADDRESS 2901 SO. BAYSHORE DR., S			re dr., suite	JITE 8H 1.3:			ADD	RESS			
СП	CITY-ST-ZIP MIAMI FL 33133							1.4 CITY-ST-ZIP				
TITLE					□ [	ELETE	21 TITLE			Change Additi	on	
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							3.2 NAME	100	oron			
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NAI					<del>-</del>		4. 2 NAME		1			
	STREET ADDRESS					4.3 STREET ADDRESS		RESS				
CITY-ST-ZIP						4.4 CITY - ST - ZIP		ı				
TIT						ELETE	5.1 TITLE			Change Additi	on	
NAI	ME						5.2 NAME					
STE	EET ADDRESS						5.3 STREET	ADD	4ESS			
CIT	Y-ST-ZIP						5.4 CITY-S	1 - ZIF	,			
TIT	Æ					ELETE	6.1 TITLE			Change Additi	٥n	
NA	AE						6.2 NAME		1			
STF	EET ADDRESS						6.3 STREET	ADDI	₹ESS			

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 in an affect ment with an address.

**FILED** 

Apr 22 1998 8:00am

Secretary of State