PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

1. Corporation	MENT # P97000 POWER MACHINE, CORP.	019	9153						
Principal Plac	o of Rusiness		alling Address		_		-{ s (#B)(OO) KID (B)(U 4097) PO(Y) AOYIX OO())	Rufut etutu terat tift	is Brigge fint tenen
Principal Place of Business Mailing Address 14384 SW 107 TERRACE 14364 SW 107 TERRACE MIAMI FL 33186 MIAMI FL 33186						DO NOT WRITE IN	THIS SPACE		
							3, Date Incorporated or Qualifed 02/28/1997		
			Mailing Address				4. FEI Number		polled For
21			26			-	65-0731871		ot Applicable Additional
Suite, Apt_	. #, etc.	27	Suite, Apt. #, etc.		_		5, 'Certificate of Status Desired		sequired
_City & State	te	- 2/1	City & State			-	g. Election Campaign Financing	\$5.00	May Be
23		28					Trust Fund Contribution		to Fees
Zip	Country		Zip	Cou	ıntıy		8. This corporation owes the current ye		<i>d</i> .
24	25	29		30		<u>, , , , , , , , , , , , , , , , , , , </u>	Personal Property Tax.	☐ Yes	ØNo
	g. Name and Address of Curre	nt Regis	stered Agent		1		10. Name and Address of New Regist	ered Agent	
CORTINA, JORGE L 14384 SW 107 TERRACE					82	Name Street Addre	ess (P.O. Box Number is Not Acceptable)		
MIAMI FL 33188					83				
					84	City		FL 85 Zip	Code
SIGNATURE	Signature, typed or printed name of registered ag		·	_	d Agent	signature required	I when reinstating) DA ADDITIONS/CHANGES TO OFFICE	TE AND DIRECT	ODS IN 12
<u>12</u> _	OFFICERS A	NO DIKE	DELETE	13.	m F	$\overline{}$	ADDITIONS/CHANGES TO OFFICE	☐ Change	
TILE	PVST		C) private	12 N					
HAME	CORTINA, JORGE L 14364 SW 107 TERRACE					ADDRESS			
STREET ADDRESS	MIAMI FL 33186				ITY-51-	ì			
CITY-ST-ZIP	MIPWI FE 33100		☐ DELETE	217				Change	Addition
NAME			-	2.2 N	AME				l
STREET ADDRESS				23\$	TREET /	ADDRESS			
CITY-ST-ZIP			. 	2.40	JIY-ST	- ZP		<u> </u>	
TITLE			☐ DELETE	3.1 Т	πLE			Change	Addition
NAME		_		32 N					
STREET ADDRESS	·	_	,	3.3 S	TREET	ADDRESS			
CITY-ST-ZIP					31Y-51	-ZP		Change	Addition
TILE			DELETE	4.1 73		}			
NAME					WE.				
STREET ADDRESS	3					ADDRESS			١
CITY-ST-ZIP			☐ DELETE	5.1 Ti	TTY-ST-	-		☐ Change	Addition
TITLE				52N		ļ			
NAME STREET ADDRESS						ADDRESS			
CITY-ST-ZIP	1			5.4 C	/1Y-57-	ze			
TITLE	 		☐ DELETE	6.1 7	TILE		<u></u>	Change	Addition
NAME				5.2 N		1			
				635	TREET (ADDRESS			

14. 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 of 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Ш

FILED Apr 06, 1999 8:00 am Secretary of State 04-06-1999 90038 044 ***150.00