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

POCUMENT # P97000019645 (5)

POLOIVE ENTERPRISES CORP.

*

FILED May 05 1998 8:00am Secretary of State



r intelpart lace of business			Walling Address						
- 19472 SW 41ST STREET MIAMI FL 33165			11472 SW 41ST STREET Miami FL 33165						
							DO NOT WRITE IN THIS SPACE	$\overline{}$	
							3. Date Incorporated or Qualified	-	
- N	10		20 Marino Address				03/03/1997	4	
	t Place of Business	 -1	26. Mai/ing Address				4. FEI Number Applied For Applied For Applied For		
Suite, Apt. #, etc		[26]	26 Suite, Apt. #, etc.				I Not Applicable	<u>-</u>	
22		27	27				5. Certificate of Status Desired See Required		
City & State		(City & State				6. Election Campaign Financing \$5.00 May Be		
23		28	+				Trust Fund Contribution Added to Fees	_	
Zip	Country	 1	?ip				8. This corporation owes or has paid the current year Intangible		
25 9. Name and Address of Current			29 30				Personal Property Tax due June 30. Yes No		
		s of Current Hegiste	rea Agent		81	Marsa	10. Name and Address of New Registered Agent	\dashv	
	MACEDO, CARLOS	_		i	"	Name			
8870-3 S.W. 40TH STREET MIAMI FL 33165					82	Street A	Address (P.O. Box Number is Not Acceptable)	7	
•					83			7	
				1				4	
			- 1		84	City	FL 65 Zip Code	1	
11. Pursua	nt to the provisions of Serlio	ns 607.0502 ap 607	1.1508, Florida Statu	ites, the al	bove	named o	corporation submits this statement for the purpose of changing its registered	Н	
office o	or registered agent, or both,	in the State of Corida	. Such change was	authorize	d by	the corp	poration's board of directors. I hereby accept the appointment as registered	- }	
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Find a 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 Lorida. 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 0508, Florida Statutes.									
SIGNATUR	Signature, typed or prodee name of	िर्माञ्जीवराज ayert ann finc it.	njipte able (NC	TE: Registore	d Ager	il signature a	c required when reinstating) DATE	1,	
12.	OFF	ICERS AND DIRECT		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	45	
TITLE	PD		DELETE	1.1 Tr	TLE		Change Addition	7	
NAME	GUERRERO, OSIRIS	6		1.2 N/	AME	ł		13	
STREET ADDRESS 11472 SW 41ST STREET				1.3 STREET ADDRESS		ADDRESS		ြို	
CITY-ST-ZIP	MIAMI FL 33165		1.4 0		TY-ST	- ZIP		Ĭ	
TITLE	EVPO		DELETE	2.1 70			Change Addition	٦٢	
NAME	AQUINO, OLGA P		22 N		AME	J			
STREET ADDRES	s 11472 SW 41ST ST	REET	2.3 (TREET A	ADDRESS		1	
CITY-ST-ZIP	MIAMI FL 33165				2. 4 City - \$1 - ZiP		•	ļ	
TITLE	TD		DELETE	3.1 TI			☐ Change ☐ Addition	1	
- NAME	GUERRERO, OLGA	М		3.2 N/	AME	1			
STREET ADDRES	44450 000 4407 07			3.3 \$1	TREET A	ADDRESS		1	
CITY-ST-ZIP	MIAMI FL 33165				Y-S	1			
TITLE	SD		DELETE	4.1 TJ		-	Change Addition	ī	
NAME	GUERRERO, ANA I			4. 2 N	AME				
STREET ADDRES	44450 000 4405 05	REET				ADDRESS		}	
CITY-ST-ZIP	MIAMI FL 33165			4.4 CI	TY-ST	_7IP			
TITLE			DELETE	5.1 Ti			Change Addition	1	
NAME				5.2 NA	AME				
STREET ADDRES	as l			•		ADDRESS		1	
CITY-ST-ZIP	~				TY-ST				
TITLE			DELETE	6.1 Tri		£ II	Change Addition	7	
NAME	1			6.2 NA		ļ	Country 1997		
	e l			1		nnesee		1	
STREET ADDRES						ADDRESS			
CITY-ST-ZIP	v certify that the information	sopplied with this tile	iri does not qualify:	6.4 Cr			Led in Section 119.07(3)(i), Florida Statutes. I further certify that the information	\dashv	
indicate	ad on this survival report of o	unidencental arguests	ig dood not quality	O TO DAD	الم جوالة أم	t mile along	tracture chall have the same local effect on if made under onto the the control	- 1	

rigidated 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 trusted explowered 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 once attackment and dress.

GNATURE:

SIGNATURE: