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 to component | | # P970 SOUTH FLORID | | 183 (4) | | | | | | |
|---|----------------------------|---|----------------------------|---------------------|----------------------------|----------------|---|---------------------------|---------------|--|
| Principal Place of Business | | | Mailing | Address | | | a idasidas viā idsin ibāni bānis sacis datis āt | 1140 FEBEL WOODL PROOF FB | 400 1401 1001 | |
| 530 SW 62ND AVENUE PLANTATION FL 33317 | | | | W 62ND AVENUE | | | | | | |
| | | | PLANT | PLANTATION FL 33317 | | | DO NOT WRITE IN THIS SPACE | | | |
| | | | | | | | 3. Date Incorporated or Qualified | THIS SPACE | | |
| | | | | | | | 02/28/1997 | | | |
| 2. Principal P | Place of Busine | 85S | 2a. Mai | ling Address | | | 4. FEI Number | | pplied For | |
| 21 | | | | 26 | | | 65-0731254 | , , | ot Applicable | |
| Suite, Apt. | #, etc. | · - ·- · · | | e, Apt. #, etc. | | | | \$0.75 | Additional | |
| 22 | | | 27 | 27 | | | 5. Certificate of Status Desired | Fee R | equired | |
| City & Stat | .0 | | City | City & State | | | 6. Election Campaign Financing | \$5.00 | May Be | |
| 23 | | | 28 | | | | Trust Fund Contribution | | to Fees | |
| Zip | | Country | Zip | | Country | 1 | 8. This corporation owes or has paid th | | | |
| | | | | | 30 | | Personal Property Tax due June 30. Yes No | | | |
| 9. Name and Address of Current Registered Agent | | | | | | Name | 10. Name and Address of New Registe | erea Agent | | |
| ORTIZ, SUELY | | | | | 81 | Name | | | | |
| 530 SW 62ND AVENUE PLANTATION FL 33317 | | | | | 82 | Street A | ddress (P.O. Box Number is Not Acceptable) | | | |
| 10 | י אוטוואוואוי | L 33317 | | | 83 | | | | | |
| | | | | | | | | | | |
| | | | | | 84 | City | | FL 85 Zip | Code | |
| 11. Pursuant | to the provision | ons of Sections 607. | 0502 and 607.15 | 08. Florida Štatu | ites, the above | e-named o | corporation submits this statement for the sures | one of changing it | ts registered | |
| Office or r | registered age | ent, or both, in the S h, and accept the o | tale of Florida. Si | uch change was: | authorized by | r the corpo | oration's board of directors. I hereby accept the | e appointment as | registered | |
| • | irii i Qiriilii Qir vyitti | п, апа ассорт ию о | onganons or, acc | 1011 007.0005, 11 | ionos platutes |). | | | | |
| SIGNATURE | Signature, typed o | x printed name of registere | d agent and title if appli | cable. (NO | TE: Registered Age | nt signature n | equired when re-instating) Dr | ATE | | |
| 12. | | OFFICERS | AND DIRECTOR | | | | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTOR | RS IN 12 | |
| TITLE | PD | | | ☐ DELETE | 1.1 TITLE | | | ☐ Change | ☐ Addition | |
| NAME | ORTIZ, S | | | | 1.2 NAME | | | | | |
| STREET ADDRESS | MANTATION FL AGAIT | | | 1.3 STF | | | | | | |
| CITY-ST-ZIP | PLANIAI | ION FL 33317 | | | 1.4 CITY - S | T-ZIP | | | | |
| TITLE | | | | DELETE | 2.1 TITLE | | | Change | | |
| NAME | i | | | | 2.2 NAME | 1 | | | | |
| STREET ADDRESS | | | | 2.3 ST | | | | | | |
| CITY-ST-ZIP | | | | DELETE | 2.4 CITY-5 | T-ZIP | | T la | 1 4 3 100 | |
| TITLE | | | | D OFFEIE | 3.1 TITLE | | | L. Change | ☐ Addition | |
| NAME PERSON | | | | | 3.2 NAME | | | | | |
| STREET ADDRESS | | | | | 3.3 STREET | | | | | |
| CITY-ST-ZIP TITLE | | | | DELETE | 3.4. CITY - S 4.1 TITLE | T- ZIP | | Change | Addition | |
| NAME | | | | occen | | | | C. Cuarige | L. Addition | |
| STREET ADDRESS | | | | | 4. 2 NAME | 4DODECC | | | | |
| CITY-ST-ZIP | | | | | 4.3 STREET - 4.4 CITY - ST | | • | | | |
| TITLE | | | | DELETE | 5.1 TITLE | - 217 | | Change | Addition | |
| NAME | | | | | 5.2 NAME | | | | | |
| STREET ADDRESS | | | | | 5.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | | | 5.4 CITY - ST | | | | ľ | |
| TITLE | - | | | DELETE | 6.1 TITLE | | | Change | Addition | |
| NAME | | | | | 6.2 NAME | | | | | |
| STREET ADDRESS | | | | | 63 STREET. | ADDRESS | | | ľ | |

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 on an attachment with an address.

6.4 CITY - ST - ZIP

CITY-ST-ZIP

Shirty Och 1111 1

FILED

Mar 03 1998 8:00am Secretary of State