## 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

## **DOCUMENT #** P97000028143 (0)

## **FILED** Apr 21 1998 8:00am Secretary of State

ANDAF	R ENTERPRISE, INC.					
Principal Place of Business Mailing Address				T INDUITAN SER BRUEL HODEN BRIEF BROEF	I IIDON KONDA NANI DIAMBE ANA INDI	
9781 SW 130TH ST. 9781 SW 130TH ST. MIAMI FL 33176 MIAMI FL 33176					DO NOT WRITE IN TH	IIS SPACE
					3. Date Incorporated or Qualified	
					03/28/1997	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21	26					Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the	current year Intangible
24	25	29	30		Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Register	ed Agent
JO	NES, CHARLES L		6	1 Name		
9900 SW 168TH ST. STE 9			Ìī	2 Street Ad	Idress (P.O. Box Number is Not Acceptable)	<del></del>
ML	AMI FL 33157		L			
			8	3		
			a	4 City		. 85 Zip Code
				T Ony	F	L S ZIP COO
office or r agent. I a SIGNATURE	egistered agent, or both, in the Sta m familiar with, and accept the obl Signature, typed or printed name of registered in				orporation submits this statement for the purpositation's board of directors. I hereby accept the a	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PTD	DELETE 1.1				Change Addition
NAME	HARRIS, NATHANIEL		1.2 NAM	E		
STREET ADDRESS	9781 SW 130TH ST.		1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33176		1.4 CITY	-ST-ZIP		
TITLE	VS	☐ DELETE	2.1 TITLE			Change Addition
NAME	HARRIS, CAROLYN	HARRIS, CAROLYN 22		E		
STREET ADDRESS	9781 SW 130TH ST.		2.3 STRE	ET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33176		2. 4 CiTY	-ST-7/P		
TITLE		DELETE 3.11				Change Addition
NAME			3.2 NAM	E		
STREET ADDRESS			3.3 STRE	ET ADDRESS		
CITY-ST-ZIP				- ST - ZIP		
TITLE		DELETE 4.1				Change Addition
NAME			4. 2 NAN			
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CITY-ST-ZIP			4.4 CITY			
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		Three	5.4 CITY			<b>1</b> Alexandr 1 4 4 4 6 6
TITLE		☐ DELETE	6.1 TITLE	4		☐ Change ☐ Addition
NAME			6.2 NAM			
STREET ADORESS			6.3 STRE	ET ADDRESS		
CITY-ST-ZIP			6.4 CITY	-ST-ZIP		

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.

**SIGNATURE:** 

4-5-98 305-233-624