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 # P97000029965 (5)

FILED May 15 1998 8:00am Secretary of State

FLOR	RIDA ALDA INC.						
Principal Plac	ce of Business	Mailing Address		·			
3056 NW 72 AVE		3056 NW 72 AVE					
MIAMI FL 33122		MIAMI FL 33122					
					DO NOT WRITE IN TH 3. Date incorporated or Qualified	IIS SPACE	·
					03/31/1997		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		pplied For
21		26	26		65-073-41.4	3. N	lot Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional
22		27			a. Certificate of Status Desired	Fee R	Required
City & State -		City & State	├-¬ '		6. Election Campaign Financing \$5.00 May Be		
Zip	Country	28 Zir	Zip Country		Trust Fund Contribution Added to Fees		
24	[25]	29	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes X No		
[87]	9, Name and Address of Currer		130		10. Name and Address of New Registers		<u> </u>
	/ASQUEZ, ALEJANDRO		8	1 Name			
. 611 NW 159 AVE			8	2 Street Ado	dress (P.O. Box Number is Not Acceptable)		
	PEMBROKE PINES FL 33028		١	2 Silect Add	areas (1.0. box (40/hbb) is 140/ Acceptable)		
			8	3			
•			8	4 City		85 Zip	Code
		/		1 - 7		▝█▃▕▎▕	
11. Pursuant office or i	to the provisions of Sections 607.050 registered agent, or both, in the State	2 and 607.1509, Florida Statu of Florida, Such change was	ites, the abo authorized l	ve-named cor by the corpora	rporation submits this statement for the purpose alion's board of directors. I hereby accept the a	e of changing i	its registered
- agent. La	am familiar with, and a copi me oving	ations of, Section 607,0505, FI	lorida Statut	es.		00	7.109.010.00
SIGNATURE	Signature, typical or profited name of registered agr		ATTENTION OF THE		uired when reinstating) OAT		
12.	OFFICERS AN		13.	da r alfuarore tedr	ADDITIONS/CHANGES TO OFFICERS A		BS IN 12
TITLE	DIRACTOR DELETE		1.1 TITLE		TISSURFICION AND TO CONTROL TO CO	Change	RS IN 12
NAME	HONT DISKHUIZE	,N	1.2 NAME				I
STREET ADDRESS	AN. VELAZCO ASTET	E 1491	9 1 13 STREET ADDRESS				
CITY-ST-ZIP	BURLO LIMA PERU		1.4 C(TY-	- ST - 7IP			
TATLE		☐ DELETE	2 1 TITLE			☐ Change	Addition
NAME			2 2 NAMI				
STREET ADDRESS	1			E1 ADDRESS			ļ
CITY-ST-ZIP TITLE	DELETE		2. 4 CITY 3.1 THLE			Change	Addition
NAME		OLLLIL	3.2 NAME			FT CHRUBS	F-3 Monitoli
STREET ADDRESS				E1 ADDRESS			
CITY-ST-ZIP			3.4. CITY				
TITLE	DELFTE		4.1 TITLE			Change	Addition
NAME			4. 2 NAM	E			
STREET ADDRESS			4.3 STREE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY-				
TITLE		DELETE !		İ		Change	Addition
NAME			5 2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY- 6.1 TITLE			Change	Addition
NAME			6.1 HILE				MBURROO (
STREET ADDRESS		/	Y	ET ADDRESS			
CITY-ST-ZIP		1	64 CITY-				}
14. I hereby o	certify that the information supplied w	th this filing does not qualify f	or the exem	ption stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the	information
endicated officer or	controls annual report or supplemental director of the corporation of the rece	aunual report is true and acc	curate/and the	nat my signatu : renort as rec	ure shall have the same legal effect as if made	under oath; tha	at I am an

Block 12 or Block 13 if changed, or on an ethapt