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

FILED Feb 27 1998 8:00am Secretary of State

	MENT # P9700 GON DEL TILE, CORPORAT		(8)					AANI 1811 1861
Principal Place	of Business	Mailing Address			i 110 júliu 10841 00414 úúliu ú		OT HIRI ODALI	
3297 N.W. 78		AVENUE						
			MI FL 33122					
				B Data lagor	DO NOT WRITE	IN THIS S	PACE	
				3. Date incorp				
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Numbe			lAn	oplied For
21		26		W65-	-07494-	PF		ot Applicable
Suite, Apt. #	, etc	Suite, Apt. #. etc).	5 Cortificate	of Status Desired			Additional
22		27		o. Certificate	Oldida Dealed		Fee Re	quired
City & State		City & State			mpaign Financing	П	\$5.00	
Zip	Country	[28] Z _(p)	Country		Contribution		Added I	
24	25	29	30		ation owes or has pai operty Tax due June	_		angible] No
	9. Name and Address of Current				Address of New Reg			
FU	JENTES, SERGIO E		81 Name	101-05	GANT	M		
	7 EAST 25TH STREET		82 Street_Add	Mel>CS dress (P.O. Box Nuc	ber is Not Acceptab	(B)		
HM	ALEAH FL 33013		ور ا	77 E.	3511.8	/ /		
			83					
	`		84 Citx	1 1	· · · · · · · · · · · · · · · · · · ·		85 OF	Goda a
	o the provisions of Sections 607,002 gistered agent, or both, in the state of familiar with, and account obligat			UKXI)		<u>FL_</u>		<u> </u>
SIGNATURE 5	Guide, West of the State of St	and tille if applicable DIRECTORS	(NOTE: Registered Agent signature requestions)	uired when reinstaling)	CHANGES TO OFFIC	DATE	DIRECTOR	RS IN 12
TITLE	PSOT	L∃ DELET	E 1.1 TITLE			l	Change	Addition
NAME	JIMENES, JUAN M		12 NAME					
STREET ADDRESS	3287 N.W. 78TH AVENUE		1.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	MIAMI FL 33122	DELET	1.4 CITY - ST - ZIP £ 2.1 TITLE				Change	Addition
NAME		C) bitter	22 NAME					L KOOMON
STREET ADDRESS			2.3 STREET ADDRESS					
CITY-ST-ZIP			2. 4 CITY-ST-ZIP					
TITLE		DELET				ī	Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP			3.4. CITY - ST - ZIP					
TITLE		☐ DELETI					Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS					
CHY-SI-ZIP		DELET	4.4 CHY-ST-ZIP			r	Change	Addition
TITLE		ב יינונוו	E 51TITLE 5.2 NAME			L	Ti ruguñs	<u> </u>
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 City - ST - ZIP					
TITLE		DELETI					Change	Addition
NAME			6.2 NAME				•	
STREET ADDRESS			6.3 STREET ADDRESS					
CITY-ST-ZIP			64 CITY-ST-ZIP					
14. I hereby co	ortify that the information supplied wit	h this filing does not qua		n Section 119.07(3)	i), Florida Statutes. I f	urther cert	ify that the	information

4. Thereby cortify 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 fire all 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 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 report is true and 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 any inchiment with an address.

SIGNATURE:

32E034 (10/97)
