FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000036459 (0)

IVONELEON ENTERPRISES, INC.

FILED Apr 10 1998 8:00am Secretary of State



Principal Place	ce of Business Mailing Address				-				
-10001-5.W. 146-COURT-102.15 5-W. 14+Court 10001-5.W.:148-COURT-102.15 5-W.;14450174 MIAMI FL 33186					4				
		MINTAN I L GUIDO				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified				
9 Principal D	loos of Business	2a. Mailing Ar'tress			04/21/1997 4. FEI Number				_
				4 COVE		. t		Applied For	-
	#. etc.	Suite, Apt. # etc.	17	TOUR	7 937018023			Not Applicable Additional	╣
22 27					5. Certificate of Status Desired		Fee Required		
City & State City & State 28 Miami P					Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country	Zip	Coun		8. This corporation owes or has p	paid the cur	rent year Ir	ntangible	1
24 33/8	6 25 U.S.A.	29 33186 30) (8.5.A	Personal Property Tax due Jur			No.	
	9. Name and Address of Current F	Registered Agent			10. Name and Address of New F	egistered /	Agent		4
	ON, MONROE ESQ.]*	31 Name						
6419-B BIRD ROAD				32 Street Add	dress (P.O. Box Number is Not Accepta	able)			1
MIA	MI FL 33155			\ <u></u>					4
			.	33					
			E	34 City		FL	85 Zip	Code	1
office or re	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was aut	horized	by the corpora	rporation submits this statement for the ation's board of directors. I hereby acc	purpose of	changing ointment a	its registered s registered	-
SIGNATURE	Signalure, typed or printed name of registered agent a				uired when reinstating)	DATE			
12.	OFFICERS AND I		13.	ngonicalgria.oro roqu	ADDITIONS/CHANGES TO OFF		DIRECTO	RS IN 12	46
TITLE	PD	DELETE	1.1 TITL	E	7.0011101107011111111111111111111111111	IOCHO AND	Change	Addition	(10/97
NAME	SHIFF, LEON		1.2 NAM	ie !				_	4
anne and the company of the first and the first			1.3 STRI	EET ADDRESS					8
CITY-ST-ZIP	1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			-ST-ZIP					R2E034
TITLE	STD	DELET E	2.1 1ITL				Change	Addition	ნ
NAME	LIMA, IVONE		2.2 NAM	l€					
STREET ADDRESS	18031-6.W: 146 COURT / 02/	5 5-W, 144 COURT	2.3 STR	eet address					1
CITY-ST-ZIP	MIAMI FL 33186		2. 4 CIT	Y-ST- <i>Z</i> IP					
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STREET ADDRESS			3.3 STRE	EET ADDRESS					
CITY-ST-ZIP			3.4. CIT	Y-ST-ZIP				· · · · · · · · · · · · · · · · · · ·]
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STREET ADDRESS			4.3 STRE	EFT ADDRESS					1
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NAME			5.2 NAM						1
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NAME			6.2 NAM						
STREET ADDRESS			6.3 STRE	ET ADDRESS					
CITY-ST-ZIP		77.	6.4 CITY	- S1 - 7IP					1

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 applicance.