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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Marthamz

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000037098 (5)

SAN MIGUEL BARBER SHOP INC.

Principal	Place	of	Business

Mailing Address

3405 NW 17 AVE MIAMI FL 33142 3405 NW 17 AVE

FILED

May 18 1998 8:00am

Secretary of State

MIAMI FL 33142		MIAMI FL 33142	MIAMI FL 33142		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified			
					04/24/1997		I	
2. Principal P	Principal Place of Business 2a. Mailing Address				4. FEt Number	Ar	plied For	
ri	26				105-0747998		ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	Additional	
2		27	27		5. Certificate of Status Desired	Fee Re	equired	
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00	May Be	
:3		28	-,		Trust Fund Contribution	Added		
_ ^{Zip}	Country	Zιρ	Countr	У	8. This corporation owes or has paid the c	urrent year Int	angible	
14	25	29	30		Personal Property Tax due June 30.		J No	
	9. Name and Address of Curre	ent Registered Agent	-		10. Name and Address of New Registered	1 Agent		
•	ntigua, William G		81	Name T	UBERTO BALBUENI	4		
340	03 NW 17 AVE		82		ress (P.O. Box Number is Not Acceptable)	1 11		
MI	MAI FL 33142		_	882	0 N.W 141 CM	INE		
			83	MIA	AAT		ľ	
~ (84	City		85 Zip (Code_, [>/	
				MIG	<i>M/</i> FI	- 3	301X	
11. Pursuant	to the provisions of Sections 607.05	602 and 607,1508, Florida Statu	ites, the above	re-named corp	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing it	s registered	
agent. La	im familiar and a cept the obli	gations of Section 607.0505. F	lorida Statute	ss.	tion's board of directors. Thereby accept the ap	in Contract	registered	
SIGNATURE:	1 pourto	Allehra			> //	14/9	P	
	Signature, typed or printed name or registered a	<u> </u>	<u>-</u>	ent signature requir	red when re-instating) JATE	7 / '	<i>j</i>	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	PRESIDENT.		1 1 TITLE			Change	Addition	
NAME	ROBERTU BALY	SUENH	1.2 NAME					
STREET ADDRESS	8820 11.11) 11/7	I PAIR MIDNI		T ADDRESS				
CITY-ST-ZIP	PRESIDENT ROBERTU BALY 8820 N.W 147	DINOC MINISTE	1.4 CITY -	ST-ZIP		Change	Addition	
TITLE		☐ beceir	2 1 TITLE	į		Change	Addition	
NAME			2.2 NAME					
STREET ADDRESS				T ADORESS				
CITY-ST-ZIP TITLE	DELETE		2.4 CITY- 3.1 TITLE	ST-ZIP		Change	Addition	
NAME	C) OCCETE		3 ? NAME	- 1		Gridinge		
STREET ADDRESS				T ADDRESS				
-								
CITY - ST - ZIP TITLE		DELETE	3.4. CITY-	SI-ZIP		Change	Addition	
NAME			4 2 NAME			oneg.		
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP TITLE		DELFTE	4.4 CHTY-1 5.1 THLE	51 - ZIP		Change	Addition	
NAME			5 2 NAME			0.290		
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			5 4 CITY -					
TITLE		DELETE	61 TITLE	01-4lr		Change	Addition	
NAME		beter	62 NAME					
				T ADDRESS				
STREET ADDRESS								
CITY-ST-ZIP	sertify that the information supplied	with this filing does not qualify	64 CITY-		Section 119.07(3)(i), Florida Statutes. I further of	certify that the	information	
indicated	on this annual report or supplemen	tal annual report is true and ac	curate and th	at my signatui	ire shall have the same legal effect as if made united by Chapter 607. Florida Statutes: and the	under oath; tha	atlam a n 📗	

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:

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytme Phone # 0202