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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Apr 14 1998 8:00am Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 1. Corporation Name P97000040223 (4) F.R.G. & ASSOCIATES, INC.

FILED

Principal Place of Business Mailing Address					
4315 N.W. 7TH STREET		4315 N.W. 7TH STREET			
#34 MIAMI FL 33126		#34 Miami Fl 33126			DO NOT WRITE IN THIS SPACE
Amount (E o	V-24	Minute 12 00120			3. Date incorporated or Qualified
					05/06/1997
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For
21		[26]			G5-07502+4 Not Applicable
Suite, Apt. #, etc		Surte, Apt. #, etc.			5. Certificate of Status Desired See Regulated Fee Regulated
City & State		City & State			
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Ζφ	Countr	y	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 Currer	nt Registered Agent		,	10. Name and Address of New Registered Agent
R	IVERA, FRANCISCO		81	Name	
4315 N.W. 7TH STREET		82 Street Ad		Street Ac	idress (P.O. Box Number is Not Acceptable)
#34		83		ļ	
M	IIAMI FL 33126		63		
1			84	City	FL 85 Zip Code
44 Burguent	to the provisions of Spetions 607 050	12 and 607 1509 Florida Clar	lutes the show	e-hamed co	
office or r	registered agent, or both, in the State im familiar with, and accept the oblig	of Horida Such change was along of Section CO7 0505	s authorized b	y the corpo	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
1	и аппа мит, ана ассерт не отпу	arions or, acciron cortiood,	r iorioa Statute	3.	
SIGNATURE.	Signature, typed or printed name of registered a ju-	ex and title if applicable (N	Olt: Registered Ag	ent signature re	quired when reastating) DATE
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD CD4 CD4NOIOOO	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	RIVERA, FRANCISCO		1.2 NAME		
STREET ADDRESS	4315 N.W. 7TH STREET MIAMI FL 33126			T ADDRESS	
CITY-ST-ZIP TITLE	VD VD	DELETE	2.1 TITLE	S1-ZIP	Change Addition
NAME	RIOS, PEDRO A		2.2 NAME	}	
STREET ADDRESS	4315 N.W. 7TH STREET			ADDRESS	
CITY-\$T-ZIP	MIAMI FL 33126		2 4 CHY-		
TITLE		DELETE	31 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			32 NAME		
STREET ADDRESS			3.3 STREI	I ADDRESS	
CITY-ST-ZIP			34. CITY-	S1-71P	
TITLE		DELETE 41111			Change Addition
NAME			4 2 NAME		
STREET ADDRESS				T ADDRESS	
City-St-ZiP		, SULTE	4 4 CITY-	ST-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	51 INLE		☐ Change ☐ Addition
NAME			5.2 NAME	ADDOLOG	į
STREET ADDRESS				T ADDRESS	1
CITY-ST-ZIP TITLE		DELETE	54 CITY - : 61 TITLE	51 · 41r	Change Addition
NAME			62 NAME		
STREET ADDRESS				T ADDRESS	
CITY OF TIP			6 4 CITY		

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 logal effect as if made under early that I am an officer or director of the corporation of the receiver of 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 attact year. With an address.