## 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 # P97000040754 (8)

SANCHUCHO'S, INC.

## **FILED** Feb 23 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Addres	Mailing Address			A EXPLICACION DISTRIBULI SUNTI DUNIA DUNIA DUNIA DUNIA SUBIR DUNIA NODOL DINIA DIDA
9210 FOUNTAINBLEU BLVD #509 MIAMI FL 33172			9210 FOUNTAINBLEU BLVD #509 MIAMI FL 33172			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
'						05/07/1997
2. Principal Place of Business 2a. Mailing Address			dress			4. FEI Number Applied For
21		·	26			65-076343/ Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5 Certificate of Status Desired \$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State		City & State	City & State			Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip		Country		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 Curr	ent Registered Agent		81	Name	10. Name and Address of New Registered Agent
MEDINA, GLADYS				61	Name	
9210 FOUNTAINBLEU BLVD #509				82	Street	Address (P.O. Box Number is Not Acceptable)
MIAMI FL 33172				-		
				83		
				84	City	85 Zip Code
				<u> </u>	L	FL 65 24 Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered						
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE			miore finale			e required when reinstating) DATE
				3.	int signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	DP OFFICERIOR			1 TITLE		Change Addition
NAME ANGELES LLORENS, MARIA DE LOS			•	1.2 NAME		
STREET ADDRESS 9210 FOUNTAINBLEU BLVD #509				1.3 STREET ADDRESS		
CITY-ST-ZIP MIAMI FL 33172				1.4 CITY-ST-ZIP		
TITLE	VD			1 TITLE		Change Addition
NAME	MEDINA, GLADYS		2	2 NAME		
STREET ADDRESS	9210 FOUNTAINBLEU BLVD	#500	2	3 STREET	ADDRESS	
CITY-ST-ZIP MIAMI FL 33172				2. 4 CITY-ST-ZIP		
TITLE	SD			1 TITLE		Change Addition
NAME	DIAZ, ANGEL N		3.	2 NAME		
STREET ADDRESS	9210 FOUNTAINBLEU BLVD	#509	1		ADDRESS	
CITY-ST-ZIP	MIAMI FL 33172	# <b>444</b>		4. CITY-5		
TITLE	III AM I F AA I I F			1 TITLE	-	☐ Change ☐ Addition
NAME			1 4.	2 NAME		
STREET ADDRESS			4.	3 STREET	ADDRESS	
CITY-ST-ZIP			4.	4 CITY-S	T-ZIP	
TITLE			DELE <b>TE</b> 5.	1 TITLE		☐ Change ☐ Addition
NAME			5.	2 NAME		
STREET ADDRESS			5.	3 STREET	ADDRESS	
CITY-ST-ZIP			5.	4 CITY - S	T-ZIP	
TITLE				1 TITLE		☐ Change ☐ Addition
NAME			6.	2 NAME		
STREET ADDRESS			6.	3 STREET	ADDRESS	
CITY-ST-ZIP				4 CITY-S		
J. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.						A CONTRACTOR OF THE CONTRACT O

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 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 attackment with an address.