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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000043610

1. Corporation Name

LUCIDOR ENTERPRISE, INC.

				1841/264   10 1841/1 1851/1 001/1 881/1 001/1 81880 11/10 01/164 11/01/1 001/1
Principal Place of Business Mailing Address				
		5578 N.W. 200TH LANE M1AMI FL 33055		
MIAMI FL 33055		MIAMI FL 33U33		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed
				05/16/1997
2. Principal P	lace of Business	2a. Mailing Address .		4. FEI Number .
21		26		APPLIED FOR Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired   \$8.75 Additional
22		27		Fee Required
City & State	e	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23	Country	28	Country	
Zip	Country 25	Zip	Outling	8. This corporation owes the current year Intangible Personal Property Tax.
24	9. Name and Address of Curren		0	10. Name and Address of New Registered Agent
Q4 Nows				
VASQUEZ, JORGE E				WIETO, BETHMAN L Address (P.O. Box Number is Not Acceptable)
5578 N.W. 200TH LANE			82 Street	S578 NW 2007H LANE.
MIAMI FL 33055			83	3 / 0 / 0 / 0 / 0 / 0 / 0 / 0 / 0 / 0 /
				led Tir Code
			84 City	MIAMI FL 85 Zip Code 333055
11 Dursyant 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 Fiorida. 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 obligation of 0.0505, Florida Statutes.				
1/29/50				
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE				
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	NIETO, BEATRIZ Change MAddition 5578 NW ZOOTH LANE
NAME	VASQUEZ, JORGE E	,	1.2 NAME	6579 WAY INDITH KANE
STREET ADDRESS	5578.N.W. 200TH LANE		1.3 STREET ADDRESS	MIAMI, FL 33055
CITY-ST-ZIP	MIAMI FL 33055	□ DELETE	1.4 CITY-ST-ZIP	Change Addition
TITLE	D DETERMAND	☐ DEFEIE	2.1 TITLE	ChangeAddition
NAME	NIETO, BETHMAN L		2.2 NAME	
STREET ADDRESS	5578 N.W. 200TH LANE		2.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	MIAMI FL 33055	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	☐ Change ☐ Addition
			3.2 NAME	
NAME STREET ADDRESS			3.3 STREET ADDRESS	
			3.4. CITY-ST-ZIP	
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME		_	4 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			5 2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-\$T-ZIP			5.4 CITY-ST-ZIP	

CITY-ST-ZIP 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 appechment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

BEHHAN METO

☐ DELETE

☐ Change

**FILED** 

May 06, 1999 8:00 am Secretary of State

05-06-1999 90025 037 \*\*\*150.00

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☐ Addition