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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANN	ANNUAL REPORT 1998		Secretary of State DIVISION OF CORPORATIONS		Secretary	y of State	
DOCU 1. Corporation	MENT # P9700004	3817 ESTMENTS CORP			•		
Principal Place of Business Mailing Address							
9445 SW 40 STREET # 106 9445 SW 40 STR MIAMI FLORIDA 33165 MIAMI FLORIDA					DO NOT WRITE IN THE	S SPACE	
					3. Date Incorporated or Qualified		
2. Principal Place of Business 2a. Mailing Address					MAY 26, 1997 4. FEI Number	Applied For	
21		26	¬ ·		65-0753392	Not Applicable	
Suite, Apt. #. etc.		Suita, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
	City & State City & State				6. Election Campaign Financing	<b>\$5.00</b> May Be	
Zip	Country	Z <sub>ID</sub>	Cou	intry	Trust Fund Contribution      This corporation owes or has paid the contribution	Added to Fees	
24	25	29	30	,	Personal Property Tax due June 30.	X Yes No	
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registered	Agent	
IBLS SANABRIA 14001 SW 10 STREET				81 Name			
				82 Street Add			
MIAMI FLORIDA 33184				83			
HANTE LONIUM 33104							
				84 City	F	85 Zip Code	
M. Pursuant office or r	to the provisions of Sections 607.05 registered agent or both, in the Statem temper with and according the obligations.	02 and 607 1508, Florida Statute e of Florida, Such change was a pations of Section 607 0505, Florida	es, the al	pove-named cor by the corpora	rporation submits this statement for the purpose atton's board of directors. I hereby accept the ap		
SIGNATURE	arriginal fight the accopt the con-	garons on occino riser boss, ric	,	0.00			
3 July 15. That is the fact same a registered again that the distribution for the condition				Agent signature requ	ured when reinstating) OATE		
12.			13.	nc	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12  Change	
NAME			12 N/	- 1		Cuange Ct Apolition	
STREET ADDRESS				REET ADDRESS			
CITY - ST - ZIP				TY-ST-ZIP			
TITLE				TLE		☐ Change ☐ Addition	
NAME	ME 2.21			ME			
STREET ADDRESS			2.3 ST	REET ADDRESS			
CITY - ST - 7IP TITLE		DELETE	2 4 C 3 1 U	TY-ST-ZIP		☐ Change ☐ Addition	
			3 2 N/	i		Change L Addition	
				REET ADDRESS			
· · · · · · · · · · · · · · · · · · ·				TY-ST-ZIP		1	
TILE L. DELETE 4.1			4.1 [1]	'LE		Change Addition	
NAME			4 2 N	AME			
STREET ADDRESS			4.3 ST	REET ADDRESS			
CITY ST-ZIP	<del></del>	Drieve		TY - ST - ZIP	The state of the s		
TITEE		☐ DEL€TE	51717		<b>200002497</b> -04/23/3801011	Change	
NAME STREET ANDRESS			5 2 NA	REE1 ADDRESS	***150.00	851	
STREET ADDRESS City St. 7/E				Y-ST-ZIP	T-T-T-1 - 1-11 - 1-11	1	
TIFLE		DELETE	610			Change  Addition	
NAME			6.2 NA	1	•		
STREET ATHINGS SO				DIEL AULIDEGE	(4	(11/2)	

14. Thereby certify that the intermation supposed with this filing does not qualify for the exemption stated in Section 1.19.07(3)(i). Florida Statutes. I further certify that the information indicated in this animal report or supplemental annual report is fittle and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or infection of the corporation on the receiver or further one powered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 12 or Block 13 if chapter for your analysis adjusted.

SANABRIA

SIGNATURE:

APRIL 14,1998 (305)559-0330

**FILED** 

Apr 22 1998 8:00am