## 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 #** P97000044200 (8)

## **FILED** May 07 1998 8:00am Secretary of State

DABER	ENTERPRISES, INC.	(0)			
Principal Place of Business Mailing Address					abit: atan a: 616 titri asıtı 4811 (ası
9527 S.W. 37TH ST 9527 S.W. 37TH ST MIAMI FL 33165 MIAMI FL 33165			DO NOT WRITE II	N THIS SPACE	
				3. Date Incorporated or Qualified	
				05/19/1997	
2. Principal P	lace of Business	2a. Mailing Address	·	4. FEI Number	Applied For
21		26		65-0753753	Not Applicable
Suite, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·	Suite, Apt. #, etc.		. 60.75 Address
22		27		5. Certificate of Status Desired	Fee Required
		City & State		6. Election Campaign Financing	\$5.00 May Be
28		28			Added to Fees
Zip			Country	8. This corporation owes or has paid	
24	25	29 3	o	Personal Property Tax due June 3	Ana ' '
	9. Name and Address of Cu		<u> </u>	10. Name and Address of New Regi	
RF	RENCEN, RENE L		81 Name		
9527 S.W. 37TH ST			62 Street Addr	one (B.O. Boy Number is Not Assessable	<u></u>
MIAMI FL 33165			PE Street Addi	ess (P.O. Box Number is Not Acceptable	"
			83		
			84 City		FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607	0502 and 607 1609 Florida Statutos	the show named corn	oration submits this statement for the nu	·
office or r	egistered agent, or both, in the S	tate of Florida. Such change was au	thorized by the corporat	oration submits this statement for the pu- ion's board of directors. I hereby accept	the appointment as registered
agent la	m familiar with, and accept the ol	bligations of, Section 607.0505, Flori	da Statutes.		· .
SIGNATURE	Signalure, typod or printed name of regulerer				
12.		AND DIRECTORS	Registered Agent signature requir	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	PTD	DELETE	1.1 TITLE	ASSITIONO, OF PANGES TO CITTOE	Change Addition
NAME	DAVILA, JORGE	bittie	1.2 NAME		E Charles E Mackinsh
STREET ADDRESS	9527 S.W. 37TH ST				ļ
	MIAMI FL 33165		1.3 STREET ADDRESS		}
CFTY - ST - ZIP TITLE	SD SD	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
	BERENCEN, RENE L				C clarge C vontion
NAME			2.2 NAME		
STREET ADDRESS	9527 S.W. 37TH ST		2.3 STREET ADDRESS		l
CITY-ST-ZIP	MIAMI FL 33165	Doriese	2. 4 CITY-ST-ZIP		Change   I Addition
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
_ STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		Longin	3.4 CITY - ST - ZIP		
TITLE		L] DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		1
STREET ADDRESS			4.3 STREET ADDRESS		}
CITY-ST-ZIP			4.4 CITY-S1-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		ļ
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		6.4 CITY - ST - ZIP		
14. I hereby o	ertify that the information supplie	d with this filing does not qualify for	the exemption stated in	Section 119.07(3)(i), Florida Statutes. I fu	irther certify that the information

annual report is true and accurate and trust to the ver or trustee empowered to execute this report as requirement with an address.

**SIGNATURE:**