### 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 # **P97000047760**1. Corporation Name

### INDIGO HOLDINGS CORPORATION

Principal Place of Business	Mailing Address		
195 SW 3RD AVENUE (2ND FLOOR)	3195 SW 3RD AVENUE (2ND FLOOR)		
HAMI FL 33129	MIAMI FL 33129		

## **FILED** Feb 16, 1999 8:00am **Secretary of State**

02-16-1999 90030 015 \*\*\*158.75



Principal Place	e of Business	Ma	ailing Address							
3195 SW 3RD AVENUE (2ND FLOOR) 3195 SW 3RD AVENUE (2ND FLOOR)						·				
MIAMI FL 33129 MIAMI FL 33129				ND 1 200	'''				. *	
							DO NOT WRITE IN TH	IIS SPACE		_
							3. Date Incorporated or Qualifed 05/19/1997			
2. Principal P	ace of Business	2a.	Mailing Address				4. FEI Number	Ap	plied For	] ;;
21		26					65-0759303		t Applicable	2000
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5: Certifcate of Status Desired	<b>\$8.75</b>		1.5
22		27				_	5, Germane di Status Desired	Fee Re	equired	
City & Stat	9		City & State				6. Election Campaign Financing	\$5.00	May Be	1
23		28					Trust Fund Contribution	Added t	to Fees	┧
Zip	Country		Zip	Co₁	ıntry		8. This corporation owes the current year	_=		
24	25	29		30			Personal Property Tax.	☐ Yes	□No	4
	9. Name and Address of Current	Regis	tered Agent		L.		10. Name and Address of New Register	ed Agent		4
CEDI	JANDEZ DICADDO I				81	Name	*			
	NANDEZ, RICARDO J				82	Street Addr	ress (P.O. Box Number is Not Acceptable)			1
	SW 3RD AVE 2ND FL					.,	1 - 1 - 2 - 2 - 2 - 2 - 2 - 3 - 3 - 3 - 3 - 3		* * * * * * * * * * * * * * * * * * * *	4
MIAN	AI FL 33129				83			医斯维维		
					84	City	8 1 1 2 8 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	85 Zip (	Code	1
					•	On,	F	L		
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m famillar with, and accept the obligati	of Florid	da. Such change was a	authorize	d by	the corporation	poration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its pointment as re	registered gistered	
SIGNATURE							d when reinstating) DATE	<u>.</u>		١_
40	Signature, typed or printed name of registered agent OFFICERS ANI			13.	1 Agen	t signature required	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	- 8
12.	D OF TOLKS AND	שוועב	DELETE	1.1 ∏	ΠF	Т	ADDITIONS OF ACCUSE TO STATISTICS	☐ Change	Addition	(11/98)
	FERNANDEZ, RICARDO J			1.2 N			•			4
NAME	3195 SW 3RD AVE 2ND FL					ADDRESS				R2E034
STREET ADDRESS	MIAMI FL									8
CITY-ST-ZIP	D D		☐ DELETE	2.1 T	TY-S	1-212		Change	Addition	
TITLE	FERNANDEZ, II RICARDO J							<u></u>		
NAME	3195 SW 3RD AVE 2ND FL			2.2 N						'
STREET ADDRESS						FADDRESS				
CITY-ST-ZIP	MIAMI FL		☐ DELETE		TTY-S	ST-ZIP		☐ Change	☐ Addition	Н.
TITLE	D SECONANDEZ ALEJANDOO I		DELETE	3.1 T				□ Outrille		1
NAME	FERNANDEZ, ALEJANDRO J			3.2 N						
STREET ADDRESS	3195 SW 3RD AVE 2ND FL					FADDRESS	三十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二			}
CITY-ST-ZIP	MIAMI FL					T-ZIP		☐ Change	. Addition	₹ .
TITLE			☐ DELETE	4.1 T			, , , , , , , , , , , , , , , , , , ,		, and Addition	1
NAME					IAMÉ					ĺ
STREET ADDRESS				4.3 S	TREET	FADDRESS				}
CITY-ST-ZIP					TY-S	T-ZIP		Channe	C Addition	-
TITLE			☐ DELETE	5.1 T				Change	Addition	']
NAME				5.2 N			· · · · · · · · · · · · · · · · · · ·			1
STREET ADDRESS	•					T ADDRESS	43			
CITY-ST-ZIP	1				TY-S	T-ZIP			_ ****-	4
TITLE	r Miller (1985) Francisco		☐ DELETE	6.1 T				☐ Change	☐ Addition	1
NAME	\$1% 5.K			6.2 N						1
STREET ADDRESS	[ ···					T ADDRESS				}
CITY-ST-ZIP				6.4 C	ITY-S	T-ZIP				

14. I hereby certify that the information supplied with this filling 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 attachment with an address, with all other like empowered.

SIGNATURE: