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 # P97000051135 1. Corporation Name

MAJORCA ENTERPRISES, INC.

FILED Apr 05, 1999 8:00 am Secretary of State

04-05-1999 90027 044 ***150.00

Principal Place of Business		Mailing Address	Mailing Address				i Bairi Abiai i	ALGE TERRE	(406 /110) 8111 (881
512 MAJORCA AVE		512 MAJORCA AVE	<u> </u>						•
CORAL GABLES FL 33134			CORAL GABLES FL 33134			DO NOT WIDE	E IN TUIC	CDACE	
	•					DO NOT WRIT	E IN THIS	SPACE	
						3. Date Incorporated or Qualifed			
		14 11 11				06/10/1997 4. FEI Number			Applied For
2. Principal P	lace of Business	— ·	2a. Mailing Address					\vdash	Not Applicable
21		26				65-0764402	•	\$8.7	5 Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	•			5. Certifcate of Status Desired			Required
City & State		City & State				6. Election Campaign Financing			00 May Be
⊢ , '	le .	28				Trust Fund Contribution			ed to Fees
Zip	Country	Zip	Co	untry		8. This corporation owes the curre	nt vear Inta	naible	
24	25	29	30	•		Personal Property Tax.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes	□No
24/	9. Name and Address of Curro		11			10. Name and Address of New Re	gistered /	gent	
				81	Name				
JIME	NEZ, JOSE I			82	Ctro et Ad	dress (P.O. Box Number is Not Acceptate	اهار	- :	
512	MAJORCA AVE			02	Street Ad	diess (P.O. Box Mulliper is Mot Acceptate	,,,,		
COR	IAL GABLES FL 33134			83			-		
					0::			85 Z	ip Code
				84	City		FL	100 2	ip Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida S	Statutes, the	above	-named co	rporation submits this statement for the pation's board of directors. I hereby accept	urpose of o	hanging	its registered registered
· ·office or re	egistered agent, or both, in the Stat m familiar with, and accept the obliq	e of Florida. Such change w ations of, Section 607.0505	vas aumonze 5, Florida Sta	itutes.	ne corpora	mons board of directors. Thoroby descript	ато арроп		
SIGNATURE	,								
SIGNATURE	Signature, typed or printed name of registered e	,	(NOTE: Registere	ed Agent		ired when reinstating)	DATE	D DIDEC	TODE IN 12
SIGNATURE	OFFICERS A	AND DIRECTORS	(NOTE: Registere	ed Agent		ired when reinstating) ADDITIONS/CHANGES TO OFF			
	OFFICERS A	,	(NOTE: Registere	ed Agent		ired when reinstating) ADDITIONS/CHANGES TO OFF		D DIREC	
12.	OFFICERS A D QUETGLAS, FRANK	AND DIRECTORS	(NOTE: Registere 13	ed Agent TITLE NAME	signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFF			
12.	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE	AND DIRECTORS	(NOTE: Registere 13	ed Agent TITLE NAME		ired when reinstating) ADDITIONS/CHANGES TO OFF			
12. TITLE NAME	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134	ND DIRECTORS	(NOTE: Registere 13 13 1.11 1.21 1.35 1.44	Agent TITLE NAME STREET	signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFF		Chan	ge Addition
12. TITLE NAME STREET ADDRESS	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D	AND DIRECTORS	(NOTE: Registers 13 1.11 1.21 1.35 1.40	Agent TITLE NAME STREET CITY-ST	signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFF			ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I	ND DIRECTORS	(NOTE: Registers 13 TE 1.11 1.21 1.33 1.44 TE 2.11	TITLE NAME STREET CITY-ST TITLE	ADDRESS	ired when reinstating) ADDITIONS/CHANGES TO OFF		Chan	ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I 512 MAJORCA AVE	ND DIRECTORS	(NOTE: Registers 13 TE 1.11 1.21 1.33 1.44 TE 2.11 2.21	NAME STREET TITLE NAME STREET STREET STREET	ADDRESS	ired when reinstating) ADDITIONS/CHANGES TO OFF		Chan	ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I	ND DIRECTORS DELET	(NOTE: Registers 13 TE 1.11 1.21 1.33 1.44 1.21 2.21 2.33 2.4	ad Agent TITLE NAME STREET TITLE NAME STREET OTTY-ST	ADDRESS	ired when reinstating) ADDITIONS/CHANGES TO OFF		☐ Chan	ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I 512 MAJORCA AVE	ND DIRECTORS	(NOTE: Registere 13 TE 1.11 1.21 1.33 1.44 TE 2.11 2.21 2.33 2.4 TE 3.11	AGE AGENT AND AGENT AND AGENT	ADDRESS	ired when reinstating) ADDITIONS/CHANGES TO OFF		Chan	ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I 512 MAJORCA AVE	ND DIRECTORS DELET	(NOTE: Registere 13 15 1.11 1.21 1.33 1.44 1.22 2.33 2.4 1E 3.11 3.21	AGA Agent TITLE NAME STREET TITLE NAME STREET CITY-ST TITLE NAME NAME	ADDRESS ZIP ADDRESS ZIP	ired when reinstating) ADDITIONS/CHANGES TO OFF		☐ Chan	ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I 512 MAJORCA AVE	ND DIRECTORS DELET	(NOTE: Registere 13 TE 1.11 1.2* 1.3\$ 1.4(TE 2.11 2.24 2.33 2.4 TE 3.11 3.21 3.35	AGENTALE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET NAME STREET	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	ired when reinstating) ADDITIONS/CHANGES TO OFF		☐ Chan	ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I 512 MAJORCA AVE	ND DIRECTORS DELET	(NOTE: Registere 13 TE 1.11 1.21 1.33 1.44 TE 2.11 2.24 2.33 2.4 TE 3.11 3.21 3.34	AGA Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-SI CITY-SI CITY-SI CITY-SI	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	ired when reinstating) ADDITIONS/CHANGES TO OFF		Chan	ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I 512 MAJORCA AVE	ND DIRECTORS DELET	(NOTE: Registere 13 TE 1.11 1.2* 1.3\$ 1.4(1) 1.2 2.4 2.3\$ 2.4 TE 3.11 3.21 3.3\$ 3.4.	TITLE NAME TITLE NAME TITLE NAME TITLE NAME STREET TITLE NAME STREET TITLE NAME TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	ired when reinstating) ADDITIONS/CHANGES TO OFF		☐ Chan	ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I 512 MAJORCA AVE	ND DIRECTORS DELET	(NOTE: Registere 13 TE 1.11 1.21 1.35 1.4(TE 2.17 2.24 2.35 2.4 TE 3.11 3.21 3.35 3.4. TE 4.11 4.2	ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME NAME NAME NAME NAME NAME NAME	ADDRESS ADDRESS F-ZIP ADDRESS F-ZIP	ired when reinstating) ADDITIONS/CHANGES TO OFF		Chan	ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I 512 MAJORCA AVE	ND DIRECTORS DELET	(NOTE: Registers 1.11 1.21 1.33 1.40 1.33 1.40 1.33 1.40 1.33 1.40 1.33 1.40 1.33 1.40 1.40 1.40 1.40 1.40 1.40 1.40 1.40	ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-SI TITLE NAME STREET STREET NAME STREET NAME	ADDRESS ADDRESS F.ZIP ADDRESS ADDRESS ADDRESS ADDRESS	ired when reinstating) ADDITIONS/CHANGES TO OFF		Chan	ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I 512 MAJORCA AVE	ND DIRECTORS DELET DELET	(NOTE: Registers 13 TE 1.11 1.21 1.33 1.4(TE 2.17 2.33 2.4 TE 3.11 3.21 3.35 3.4 TE 4.11 4.2 4.33 4.4(ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-SI TITLE NAME STREET NAME NAME STREET CITY-SI TITLE NAME STREET CITY-SI TITLE NAME CITY-SI TITLE NAME STREET CITY-SI TITLE NAME	ADDRESS ADDRESS F.ZIP ADDRESS ADDRESS ADDRESS ADDRESS	ADDITIONS/CHANGES TO OFF		Chan	ge Addition ge Addition ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I 512 MAJORCA AVE	ND DIRECTORS DELET	(NOTE: Registers 13 TE 1.11 1.21 1.33 1.4(TE 2.17 2.24 2.33 2.4 TE 3.11 3.21 3.35 3.4 TE 4.11 4.2 4.33 4.4(TE 5.11	ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-SI TITLE NAME TITLE NAME TITLE NAME TITLE NAME	ADDRESS ADDRESS F.ZIP ADDRESS ADDRESS ADDRESS ADDRESS	ADDITIONS/CHANGES TO OFF		Chan	ge Addition ge Addition ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I 512 MAJORCA AVE	ND DIRECTORS DELET DELET	(NOTE: Registers 13 TE 1.11 1.21 1.33 1.40 TE 2.11 2.24 2.33 2.4 TE 3.11 3.21 3.34 TE 4.11 4.2 4.33 4.4(TE 5.11	ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET TITLE NAME STREET TITLE NAME NAME NAME NAME	ADDRESS IP ADDRESS I-ZIP ADDRESS ADDRESS I-ZIP ADDRESS ADDRESS ZIP	ADDITIONS/CHANGES TO OFF		Chan	ge Addition ge Addition ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I 512 MAJORCA AVE	ND DIRECTORS DELET DELET	(NOTE: Registers 1.17 1.28 1.33 1.40 1.5 1.4 1.5 1.4 1.5 1.4 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5	ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME NAME STREET CITY-ST TITLE NAME STREET TITLE NAME STREET STREET TITLE NAME STREET	ADDRESS LIP ADDRESS LIP ADDRESS LIP ADDRESS LIP ADDRESS AD	ADDITIONS/CHANGES TO OFF		Chan	ge Addition ge Addition ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I 512 MAJORCA AVE	DELET	(NOTE: Registers 13 TE 1.11 1.21 1.33 1.40 TE 2.11 2.24 3.33 2.4 TE 3.11 4.2 4.33 4.4(TE 5.11 5.26 5.33 5.44	ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET TITLE NAME	ADDRESS LIP ADDRESS LIP ADDRESS LIP ADDRESS LIP ADDRESS AD	ADDITIONS/CHANGES TO OFF		Chan	ge Addition ge Addition ge Addition ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I 512 MAJORCA AVE	ND DIRECTORS DELET DELET	(NOTE: Registers 13 TE 1.11 1.21 1.33 1.40 TE 2.11 2.22 2.33 2.4 TE 3.11 4.2 4.33 4.4 TE 4.11 4.2 4.33 4.4 TE 5.11 5.21 5.38 5.44	ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET TITLE NAME STREET TITLE	ADDRESS LIP ADDRESS LIP ADDRESS LIP ADDRESS LIP ADDRESS AD	ired when reinstating) ADDITIONS/CHANGES TO OFF		Chan	ge Addition ge Addition ge Addition ge Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A D QUETGLAS, FRANK 512 MAJORCA AVE CORAL GABLES FL 33134 D JIMENEZ, JOSE I 512 MAJORCA AVE	DELET	(NOTE: Registers 13 TE 1.11 1.28 1.38 1.40 TE 2.17 2.29 2.33 2.4 TE 3.11 4.2 4.38 4.40 TE 5.11 5.28 5.40 TE 6.17	ad Agent TITLE NAME STREET TITLE NAME NAME STREET TITLE NAME NAME NAME NAME NAME NAME NAME NAME NAME	ADDRESS LIP ADDRESS LIP ADDRESS LIP ADDRESS LIP ADDRESS AD	ired when reinstating) ADDITIONS/CHANGES TO OFF		Chan	ge Addition ge Addition ge Addition ge Addition

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 suppliemental 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 leceiver 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 or an attainment with an address, with all other like empowered.

SIGNATURE: