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

P97000054537 (0) DOCUMENT

FILED Jul 09 1998 8:00am Secretary of State

RELIAE	BLE DEVELOPERS, INC.					: IPONOBE SER INDEX 1880 BARRE BRILL B		
2		Mailing Add						
Principal Plac								
7941 S.W. 89TH TERRACE 7941 S.W. 89TH TE MIAMI FL 33156 MIAMI FL 33156				RACE				
MIRMI PL 33	130	MIAMI FE S	MIAMI PL 33130			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						06/20/1997		
	Place of Business	2a. Mailing A	2a. Mailing Address			4. FEI Number Applied For		
21		26				Not Applicable		
Suite, Apt.	. #, elc.	- 1	Suite, Apt #, etc.			5. Certificate of Status Desired		
City & State		[27]	City & State					
23			28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip		Country	,	8. This corporation owes or has paid the current year intangible		
24	25	29	30			Personal Property Tax due June 30.		
	9, Name and Address of Curre	ent Registered Age	ent			10. Name and Address of New Registered Agent		
DE	YURRE, VICTOR H			81	Name			
701 BRICKELL AVE				82	Street A	Street Address (P.O. Box Number is Not Acceptable)		
	TH FLOOR							
MI	AMI FL 33131			83				
	*			84	City	■ 85 Zip Code		
					1	FL ()		
11. Pursuant 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 Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered								
agent. Lam familia-viviti, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	772		Name .			<u>s (, 198</u>		
12.	Signature, Typed or partled name of registered a	ND DIRECTORS		Gred Agr	ent signature re	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	<u> </u>			1 TITLE	Т	☐ Change ☐ Addition		
NAME	HERNANDEZ, FRANCISCO	_	_	2 NAME				
STREET ADDRESS	7941 S.W. 89TH TERRACE				ADDRESS			
CITY-ST-ZIP	MIAMI FL 33156		1	4 CITY - S	ST - ZIP			
TITLE			T	1 TITLE		Change Addition		
NAME			2	2 NAME				
STREET ADDRESS			2.	3 STAŁET	ADDRESS			
CITY-ST-ZIP	<u> </u>		2	4 Cil Y - S	ST · ZIP			
TITLE			DELETÉ 3	1 1111.8		☐ Change ☐ Addition		
NAME			3	2 NAME				
STREET ADDRESS			3	3 STREET	ADDRESS			
CHTY-ST-ZIP			T	4. CITY - S	ST-ZIP			
TITLE		Ł.		1 TITLE		☐ Change ☐ Addition		
NAME				2 NAME				
STREET ADDRESS			4.	3 STREET	ADDRESS			
CITY-ST-ZIP		···· · · · · · · · · · · · · · · · ·		4 CITY - S	ST-ZIP	Change		
TRILE		L		1 THLE		Change Addition		
NAME				2 NAME	1000100			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			~ · · · · · · · · · · · · · · · · · · ·	4 CITY - S	or-ZIP	Change Addition		
TITLE	DESTRIE			6.1 TITLE 6.2 NAME		2000025859 1 2		
NAME OTREET ADDRESS					ADDRESS	-07/13/9801010040 \\\\\\\\\		
STREET ADDRESS						***550.00 J/\		
DITY-ST-ZIP	Lead that the internation coupled	with this Union door		4 CITY - S		and in Socian 119 07/3/(i) Florida Statutos I further partify that the information		

nereby cernity that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio indicated on this armual report or supplied until 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