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 # P97000057618 (5)

MULET & SONS INC.

Principal Place of Business

Mailing Address

FILED
May 15 1998 8:00am
Secretary of State



5525 WEST 26TH COURT APT 208 HIALEAH FL 33016		5525 WEST 26TH COURT APT 208 HIALEAH FL 33016	APT 208		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/01/1997			
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		Applied For	
21		26			65-0766694		Not Applicable	
Suite, Apt. W. etc.			17 P.O. Box 661323		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State 28 MI4MI SPAIN	MIAMI SPRINGS		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	2ip 29 33266 30	Country		This corporation owes or has paid the curr Personal Property Tax due June 30.	ent year Yes	Intangible	
	9. Name and Address of Curre				10. Name and Address of New Registered A	gent		
MI	JLET, RUBEN T		81	Name				
5525 WEST 26TH COURT APT 208			82	Street Add	ress (P.O. Box Number is Not Acceptable)			
HI	ALEAH FL 33016		83	10.1.01.0				
			84	City	FL	85 Z	ip Code	
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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered age							
12.		-	13.	ni signature requ	ulted when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIDECT	ORC IN 12	
TITLE	PD		1.1 THILE	T		Chang		
NAME	MULET, RUBEN T		1.2 NAME		•	Onong	ic Li Addition	
STREET ADDRESS	ERGE WEST GOTH COURT		1.3 STREET	ADDRESS				
CITY-ST-ZIP	HIALEAH FL 33016		1.4 CITY - ST					
TITLE	SD		2.1 TITLE			Chang	e Addition	
NAME	DOCC DALII		2.2 NAME					
STREET ADDRESS	BEAR WIFAY ACTU COUNT		2.3 STREET ADDRESS					
CITY-ST-ZIP	HIALEAH FL 33016		2. 4 CITY-S			j		
TITLE	TD .		3.1 TITLE			Chang	e	
NAME	Mulet, Ruysdel		3.2 NAME					
STREET ADDRESS	5525 WEST 26TH COURT		3.3 STREET A	ADDRESS				
CITY-ST-ZIP	HIALEAH FL 33016		3.4. CITY - \$1	T- 71P			1	
TITLE		☐ DELETE 4	4.1 TITLE			Chang	e Addition	
NAME			4. 2 NAME					
STREET ADDRESS		4	4.3 STREET A	ADDRESS			ľ	
CITY-ST-ZIP			4.4 CITY - ST	- 21P				
TITLE		☐ DELETE =	5.1 TITLE			Chang	e Addition	
NAME		5	5.2 NAME					
STREET ADDRESS		i s	5.3 STREET A	ADDRESS				
CITY-ST-ZIP		5	5.4 CITY-ST	- ZIP			1	
TITLE		☐ DELETE 6	5.1 TITLE			Chang	e Addition	
NAME		6	6.2 NAME				1	
STREET ADDRESS		6	6.3 STREET A	ADDRESS				
CITY-ST-ZIP			6.4 CITY - ST					

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 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.

26.00

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