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PROFIT CORPORATION ANNUAL REPORT

UAL REPO 1998



ORIDA DEPARTMENT OF STATE

Secretary of State

Secretary of State
Lavision of Corporations

DOCUMENT # P97000059670 (4)

FILED Apr 13 1998 8:00am Secretary of State

Principal Place of Business Mailing Add ress 1541 AGUA AVENUE CORAL GABLES FL 33156 CORAL GABLES FL 33156						. <u></u>	DO NOT WRITE IN THIS 3. Date incorporated or Qualified			
				:				07/07/1997		,
2. Principal Place of Business			20.	2a. Mailing Address				4. FEI Number	V	Applied For
19			26					APPLIED FOR		Not Applicable
Suite, Apt #, etc.			├ ──¬	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Addition.		
City & Stat			[27]	Crty & State						Required
3			28	Sty w State				6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip		Country		Z(i)	Co	untry	,	8. This corporation owes or has paid the cur		
4		25	29		30			_ ·		☐ No
	9. Name	and Address of Curre	nt Regist	ered Agent				10. Name and Address of New Registered	Agent	
DI/	AZ, PEDRO	0				81	Name			
1541 AGUA AVENUE CORAL GABLES FL 33156						82	Street Add	ddress (P.O. Box Number is Not Acceptable)		
						83	· · · · · · ·			
v						~				
						84	City	FL	85 Zij	o Code
ugo		me, and accept the conf	gamo is or,							
	Signature, typic	d or printed name of registered as		r sppt cable (N	NOTE: Register	ed Age		coration submits this statement for the purpose of tion's board of directors. I hereby accept the appropriate when renstating) DATE ADMINIONS/CHANGES TO DESIGERS AND	·	DDC IN 12
12		oo printed name of registered at OFFICERS Af		of applicable (N	NOTE: Registere 13.	ed Age			DIRECTO	
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Interest certify that the information supplied with his tiling does not qualify for the exemption stated in Section 19.07(3)(f), Florida Statutes. Further certify that the information indicated on this 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.

SIGNATURE:

Own Orting

1-12-98-668-3104