## : FILING FEE AFTER MAY 1ST IS \$550.00

COR: JRATION **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State /\*
DIVISION OF CORPORATIONS

P97000060278 (3) DOCUMENT #

1. Corporation Name

## **FILED** Apr 03 1998 8:00am Secretary of State

ULTIM/	ATE CUACH LINE INC.				
Principal Plac	e of Business	Mailing Address			A Bitter Marie Itali 180a) 1811 (201
3940-PAMBLE		3040-FAMBLER-AVE.			
ST_CLOUD-		ST. 01000 TE 9172	. 6. 5	BO NOT WOITE IN T	IIIO BOACE
רוָרוו	Hatcher ein	11717 Hatche		DO NOT WRITE IN T	HIS SPACE
Orlan	du, 3l. 32824	Orlando, J.	2. 328 <b>2</b> 4	07/10/1997	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 171		26 117 17 Hat	chiveir	59345-6776	Not Applicable
Suite, Apt.	#, <b>e</b> tc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	(6	City & State		6. Election Campaign Financing	\$5.00 May Be
23 ORL	<del></del>	28 Olland		Trust Fund Contribution	Added to Fees
Zip 24 3 2 8	24 25 Orange	29 32824 3	Country O O Range	8. This corporation owes or has paid the Personal Property Tax due June 30.	e current year Intangible
	9, Name and Address of Gurrent	Registered Agent	of present c	10. Name and Address of New Registe	
LO		5 CAPPERA	81 Name	DORIS CARREN	21
30		Hatcher ier	82 Street Add	ress (P.O. Box Number is Not Acceptable)	<i>Σ</i> η
SF			[]	ress (F.O. BOX Normber is Not Acceptable)	}
	Unla	ndo fl. 3282	4 83 117	17 Hatcher ein	
			84 City M	<u> </u>	85 Zip Code /
			Un		FL   32824
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above-named corp	poration submits this statement for the purpo	se of changing its registered
agent. I s	am lamilian with an according the obligation	ions of, Section 607.0505, Flori	da Statutes.	tion's board of directors. I hereby accept the	appointment as registered
SIGNATURE	1 It was			3/	11/98
45	Signature, typed or printed have of registered agent		Registered Agent signature requi	red when reinstating) U/A	1t. I.
12.	OFFICERS AND	DIRECTORS	11 11115 22 45 1	ADDITIONS/CHANGES TO OFFICERS	
NAME	LOPEZ, MIRIAM	E DELECTE	1.1 TITLE PRESIDENT	DORIS CARRERA	, , , , , , , , , , , , , , , , , , ,
STREET ADDRESS	3040 RAMBLER AVE.		1.3 STREET ADDRESS	17717 Hatcher ein	,
CITY-ST-ZIP	ST. CLOUD FL 34772		1.4 CITY - ST - ZIP	1717 Hatcher eur Orlando Gl. 32824	(
TITLE	V	DELETE	2.1 TITLE		Change Addition
NAME	CLAVEL, MARYANGEL	- 1	2.2 NAME		
STREET ADDRESS	10155 COLLINS AVE. #305		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2 4 CITY-S1-ZIP		İ
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		)
CITY - ST - ZIP	<u>-</u>		3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		ļ
STREET ADDRESS			4.3 STREET ADDRESS		1
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP		Change
TITLE	}	רין מברבוב	5.1 TITLE		Change Addition
NAME Street address			5.2 NAME		か
***************************************			5.3 STREET ADDRESS		내소
CITY-ST-ZIP TITLE		DELETE	5 4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME	•	C DELETE	6.2 NAME		C Outube C Workfull
CTREET ANNOCCO			E 63 CIDEEL YDDDEGG		<b>A</b> L
STREET ADDRESS CITY-S1-ZIP			6.3 STREET ADDRESS 6.4 City-St-Zip		DEP. 1158.35

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.

Poris

Carrera