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 #

1. Corporation Name

P97000060436 (7)

FILED Apr 16 1998 8:00am Secretary of State

	TOS VONDOS	DZ NAUAC	PPPLY	(DEP	
Principal Place	of Business	Mailing Address				TELEVISION PORTE, and the construction of the
4826 S.W. 75TH AVENUE MIAMI FL 33155		4826 S.W. 75TH AVENUE MIAMI FL 33155				DO NOT WRITE IN THIS SPACE
SAME						3. Date Incorporated or Qualified 07/11/1997
2. Principal Place of Business 21		28. Mailing Address 26				4. FEI Number 0767238 Applied For Not Applicable
Suite, Apt. #, etc.		Suile, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip 24	Country 25	Zip 29	Cour 30	ntry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9, Name and Address of Curre	nt Hegistered Agent		81	Name	10. Name and Address of New Registered Agent
AMAYA, GLORIA O			Į			<u> </u>
7699 S.W. 153RD COURT #108				82	Street A	et Address (P.O. Box Number is Not Acceptable)
MIAMI FL 33193			-	83		
			ĺ	84	City	FL 85 Zip Code
office or re	o the provisions of Sections 607.050 egistered agent, or both, in the State in fa miliar with, and accept the oblig	of Florida. Such change was a	authorized	l by	the corp	ed corporation submits this statement for the purpose of changing its registered or poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Chesture based on the party of an in-	DIO.	v. 75			ure required when reinstating) DATE
			13.	<u>-</u>		
TITLE	PSTD	DELETE	1.1 111	.1 TITLE		Change Addition
NAME	AMAYA, GLORIA O		1.2 NA	ME		
STREET ADDRESS 7699 S.W. 153RD CT. #108			1.3 STF	1.3 STREET ADDRESS		;]
CITY-ST-ZIP MIAMI FL 33193			1.4 CITY-ST-ZIP		- ZIP	
TITLE		☐ DELETE	2.1 1(1)	LF		Change Addition

22 NAME 2.3 STREET ADDRESS

3.1 TITLE

3.2 NAME

41 TITLE

4.2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

DELETE

DELETE

DELETE

DELETE

2. 4 CITY - ST - ZIP

3 3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY - ST- ZIP

4.4 CITY - ST - ZIP

3 4. CITY - ST - ZIP

6.2 NAME ***150.00 STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Thereby 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 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.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

NAME

TITLE

TITLE

10000249\$

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(305) 2625949

Change

☐ Addition

☐ Addition