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

P**RO**FIT CORP**O**RATION ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700061344 (2)

TICO ENTERPRISES, INC.

for the ED

98 JUL 16 PM 2: 48

SECRETARY OF STATE
TALLAHASSEE F. OP OF

Principal Place of Business Mailing Address					
7951 SW 40TH STREET 7951 SW 40TH STREET					·
SUITE 206 MIAMI FL 33	155	SUITE 206 Miami FL 33155			DO NOT WRITE IN THIS SPACE
4.07		WILTHII IE DATOS			3. Date Incorporated or Qualified
	•				07/15/1997
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			Not Applicable
Suite, Apt.	#, <b>e</b> lc.	Suite, Apt. #, etc.			SR 75 Additional
22		27			6. Certificate of Status Desired Fee Required
City & Stat	to	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip			Cour	itry	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent
DIA	DIAZ, <b>R</b> EYNALDO				
	O EAST 45TH STREET		h	32 Street /	Address (P.O. Box Number is Not Acceptable)
	ALEAH FL 33013			5treet Address (P.O. Box Number is Not Acceptable)	
\	,		[	33	
			L		
[				City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508. Florida Statu	tes, the ab	ove-named	• • • • • • • • • • • • • • • • • • •
office or r	registered agent, or both, in the St. am familiar with, and accept the ob-	ate of Florida. Such change was	authorized	by the corp	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
	im t <b>am</b> iliar with, and accept the on	iligations of, Section 607.0505, F	iorida Statu	tes.	
SIGNATURE	Signature, typed or profiled name of registerest	essent end tille il producable (NO	IF Rogistored	Anont signature	required when reinslating) DATE
12.		AND DIRECTORS	13.	rigorit organizate	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PVST	DELETE	1.5 TITL	F	Change Addition
NAME	DIAZ, REYNALDO	-	1.2 NA	af Ì	A DOCCOORDOS A
STREET ADDRESS	250 EAST 45TH STREET			EET ADDRESS	<b>4</b> 00002592 <b>3</b> 844 -07/17/9801087009
CITY-ST-ZiP	HIALEAH FL 33013		1	(-S1-ZIP	****900.00 ****150.60
TITLE	n	DELETE	2.1 7171		Change Addition
NAME	DIAZ, REYNALDO		2.2 NAM	·	
1	250 EAST 45TH STREET		, T		
STREET ADDRESS	HIALEAH FL 33013			EE1 ADDRESS	
CITY-ST-ZIP TITLE	INCLAILE 33013	DELETE	2. 4 CIT	Y-S1-ZIP	Change Addition
		נ_ טנגנונ			Change Addition
NAME			3.2 NAM		
STREET ADDRESS				EET ADDRESS	
CITY-ST-ZIP		T DC+CYC		Y-ST-ZIP	Channe Laddy-n
TITLE		[_] DELETE	4.1 7/11		Change Addition
NAME			4. 2 NA		
STREET ADDRESS				EET ADDRESS	
CITY-ST-ZIP				-S1-ZIP	
TITLE		☐ DELETE	5.1 TITL	F	Change Addition
NAME			5.2 NAM	Œ ĵ	
STREET ADDRESS			5 3 STR	EET ADDRESS	
CITY+ST-ZIP			5.4 CiT	'-S1-ZIP	
TITLE		DELETE	6.1 TITL	E T	Change Addition
NAME			6.2 NAN	16	
STREET ADDRESS			6.3.STR	FET ADDRESS	

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 ceth; 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 changes.

SIGNATURE:

CITY-ST-ZIP

305 26/6257