


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

FILED
May 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **PA97000063213**
1. Corporation Name
CIEDES, CORP.

Principal Place of Business: **1020 94TH ST #303 BAY HARBOUR ISLAND, FL 33154**
Mailing Address: **1020 94TH ST #303 BAY HARBOUR ISLAND, FL 33154**

DO NOT WRITE IN THIS SPACE
3. Date Incorporated or Qualified: **07-22-97**

21. Principal Place of Business: **1020 94TH ST #303**
22. Suite, Apt. #, etc.

4. FE Number: **65-0771452**
Applied For: Not Applied For:

23. City & State: **BAY HARBOUR ISLAND, FL**

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

24. Zip: **33154**
25. Country: **DADE**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

29. Zip: **33154**
30. Country: **DADE**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
**MARJORIE FERNANDEZ ANTEQUERA
1020 94TH ST #303
BAY HARBOUR ISLAND, FL 33154**

10. Name and Address of New Registered Agent
81 Name: **MARJORIE FERNANDEZ ANTEQUERA**
82 Street Address (P.O. Box Number is Not Acceptable): **1020 94TH ST #303**
83
84 City: **BAY HARBOUR ISLAND FL** 85 Zip Code: **33154**

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: *Marjorie* DATE: **04-29-98**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PRESIDENT - TREASURER	<input checked="" type="checkbox"/> DELETE
NAME	ELENA DIEZ PINTO	
STREET ADDRESS	1020 94TH ST #303	
CITY - ST - ZIP	BAY HARBOUR ISLAND, FL 33154	
TITLE	VICE-PRESIDENT - SECRETARY	<input checked="" type="checkbox"/> DELETE
NAME	DORIS AMEZ QUIVA DEL VALLE	
STREET ADDRESS	1020 94TH ST #303	
CITY - ST - ZIP	BAY HARBOUR ISLAND, FL 33154	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	MARJORIE FERNANDEZ ANTEQUERA	
1.3 STREET ADDRESS	1020 94TH ST #303	
1.4 CITY - ST - ZIP	BAY HARBOUR ISLAND, FL 33154	
2.1 TITLE	VICE-PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	MABEL FERNANDEZ ANTEQUERA	
2.3 STREET ADDRESS	1020 94TH ST #303	
2.4 CITY - ST - ZIP	BAY HARBOUR ISLAND, FL 33154	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	500002529265	
4.3 STREET ADDRESS	-05/19/98--01061--017	
4.4 CITY - ST - ZIP	***150.00	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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 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.

CR2E034 (10/97)