

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

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000072875

1. Corporation Name
GOODWAY INC.

Principal Place of Business
135 HAMPTON LN
KEY BISCAYNE FL 33149

Mailing Address
135 HAMPTON LN
KEY BISCAYNE FL 33149

99 MAY 24 PM 12:51

FILED
STATE
TALLAHASSEE, FLORIDA

5/4/99 90004/014 \$150.00
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 7344 NW 8th Street Suite, Apt. #, etc. 22 City & State 23 Miami, FL 33126 24 Zip 33126 25 Country USA	2a. Mailing Address 26 7344 NW 8th Street Suite, Apt. #, etc. 27 City & State 28 Miami, FL 33126 29 Zip 33126 30 Country USA
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3. Date Incorporated or Qualified 08/21/1997	4. FEI Number APPLIED FOR 65-0832141	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No		

9. Name and Address of Current Registered Agent
BERNAL, JOSE F
135 HAMPTON LN
KEY BISCAYNE FL 33149

81 Name Bernal, Jose F	82 Street Address (P.O. Box Number is Not Acceptable) 7344 NW 8th Street	83	84 City Miami	85 FL	86 Zip Code 33126
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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 Jose F Bernal President DATE 4/22/99
Signature: Typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BERNAL, JOSE FERNANDO 135 HAMPTON LN KEY BISCAYNE FL 33149	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BERNAL, SANTIAGO 135 HAMPTON LN KEY BISCAYNE FL 33149	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BERNAL, ANA CAROLINA 135 HAMPTON LN KEY BISCAYNE FL 33149	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		☒ Change ☐ Addition
11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	PD Bernal, Jose Fernando 1121 Crandon Blvd #E-1104 Key Biscayne, FL 33149	
21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	VD Bernal, Santiago 1121 Crandon Blvd #E-1104 Key Biscayne, FL 33149	
31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	SD Bernal, Ana Carolina 1121 Crandon Blvd #E-1104 Key Biscayne, FL 33149	
41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP		
51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP		
61 TITLE 62 NAME 63 STREET ADDRESS 64 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, with all other like empowered.

SIGNATURE: Jose F Bernal Jose F Bernal 4/22/99 (305) 765-8067
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E034 (1/98)