FIRE 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 #

P97000073265 (5)

FILED Feb 16 1998 8:00am Secretary of State

	Name F9700	0073203 (3)		
Principal Place of Business Mailing Address				I KODINDON NIO KUTAI TEDDIN DONIN TONIN ETAKI DENIN ADDOK KINTO HIKUB DANDA BINA ADDA
8181 NW 36 ST SUITE 27-C 8181 NW 36 ST SUITE 27-C				
MIAMI FL 33166 MIAMI FL 33166				
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 08/25/1997
2. Principal Place of Business		26. Mailing Address 26		4. FEI Number 6V-0781833 Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired
City & State City &		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25 25 Curren		30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
~	9. Name and Address of Currer	it Hegistered Agent	61 Name	~
CORNER, MICHAEL A				A F. Alcordado v Associates Co. ddress (P.O. Box Number is Not Acceptable)
MIAMI FL 33166			82 Street A	ddress (P.O. Box Number is Not Acceptable)
83				
٠			64 City	85 Zip Code
1				419m1 FL 33/3V
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 affice 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	Signature, typical or printed nature or reputitive age	Land title it applicable ROTE	Registered Agent signature re	
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	President - secretory Change MAddition
NAME	ALVARADO, BENJAMIN		1.2 NAME	•
STREET ADDRESS	7122 NW 50 STREET		1.3 STREET ADDRESS	•
CITY-ST-ZIP	MIAMI FL 33166	☐ DELETE	1.4 CITY-ST-ZIP	VICO-PTESIDON+ Change MAddition
TITLE			2.1 TITLE	
NAME STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS	Constanza Alvarado 888 Brickell Key Dr Apl 710
CITY-ST-ZIP			2 4 CITY-ST-ZIP	Hiami Fla 33166
TITLE		DELETE		Treasurer.
NAME			3.2 NAME	Felies Alvorado
STREET ADDRESS			3.3 STREET ADDRESS	800 Brickell Key Dr DP+710
CITY-ST-ZIP			3.4. CITY - ST-ZIP	Hiemi Fle 33166
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADORESS	
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP	Change Addition
TITLE			5.1 TITLE	C change C Adonion
NAME Street address			5.2 NAME 5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	j
CITY-ST-ZIP			6.4 CITY - ST - ZIP	
14. I hereby c	pertify that the information supplied wo	ith this filing does not qualify for	the exemption stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the information ature shall have the same legal effect as if made under oath; that I am an

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 attackment with an address.

SIGNATURE

enjamin alvaredo

1/14/98