## 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 # P97000073608 (6)

EXCEL GROUP, INC.

## FILED Feb 11 1998 8:00am Secretary of State

W/OLC					
Principal Plac	e of Business	Mailing Address			<u> </u>
Principal Place of Business		· ·			
2539 S.W. 26TH STREET MIAMI FL 33133		2539 S.W. 26TH STREET Miami Fl 33133			
				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
9 Principal P	lace of Business	2a. Mailing Address		08/25/1997 4. FEI Number	10-11-45-
21 ~ ·		26		65-0807980	Applied For Not Applicable
		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	6	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 cu	
24	25		30		Yes No
g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
CUERVO, YAMIRA R				amira & Cue	<b>~</b> 0
2539 S.W. 26TH STREET				ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33133 <u>  383</u>				1 200 010-21	·····
			63		
			84 005	am's FL	85 Zip Code
11 Purcuant	to the provisions of Sections 607 05	22 and 607 1508 Florida Statutor		<u> </u>	changing its registered
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 Signature, typed or printed name of registered egent and little if applicable (NOTE: Registered Agent signature required when reinstating)  DATE					
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	D	☐ DELETE	11 TITLE		Change Addition
NAME	CUERVO, YAMIRA R		1.2 NAME		1
STREET ADDRESS	2539 S.W. 26TH STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33133		1.4 CITY-ST-ZIP		
TITLE		[_] DELETE	2.1 TITLE		Change Addition
NAME	••		2.2 NAME		j
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	2.4 CITY - ST - ZIP 3.1 TITLE		☐ Change ☐ Addition
NAME			3.1 IIILE 3.2 NAME		C Cuaulife D variation
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-S1-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			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		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I hereby of indicated of	eππy that the information supplied v on this annual report or supplement	rith this filing does not qualify for at annual report is true and accur	tne exemption stated in rate and that my signatu	Section 119.07(3)(i), Florida Statutes. I further ce ire shall have the same legal effect as if made un	rtity that the information der path; that I am an

14. I hereby certify that the information supplied with this tiling doos 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 roceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13/11 chapter 607 on an attachment with an address.

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of OLIGANIT

1/26/98 (305) 90281.46