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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

U5#

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90145 035 \*\*\*150.00

## DOCUMENT # P97000073711

City & State   City & State   28	Principal Place	of Business	Mailing Address			
26     Suite, Apt. #, etc.   Suite, Apt. #, etc.   27	-	6	MIAMI FL 33166	64TH STREET	#7	
Suite, Apt. #, etc.  22  City & State  City & State  23  Zip  Country  25  29  Name and Address of Current Registered Agent	<del>_</del>	lace of Business	— ·	s	<del></del>	
City & State   City & State   28		#, etc.	Suite, Apt. #, e	tc.		
Zip   Country   Zip   Country	<del></del>	<u> </u>			<del></del>	<del></del>
24 25 29 30 9. Name and Address of Current Registered Agent	·	-	- ·		_	
9. Name and Address of Current Registered Agent	Zip	Country	Zip	<del></del> -1	untry	
	24	I - I - I - I - I - I - I - I - I - I -		30		
		9. Name and Address of Cu	rrent Registered Agent		81	Name
					82	Street Ad
VILARINHO, CARLOS ALBERTO G 25 SOUTH EAST 2ND AVENUE  82 Street A	000	FLOOR-SHITE NO. 305			93	

Applied For Not Applicable

\$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

□No

Yes

DO NOT	WRITE	IN THIS	SPAC
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3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

Trust Fund Contribution

Personal Property Tax.

08/26/1997 4. FEI Number

65-0777054

PSD   DELETE   1.1 TITLE   Change   Addition	9. Name and Address of Current Registered Agent				10. Name and Address of New Registered A	igeni.		
25 SOUTH EAST 2ND AVENUE 3RD FLOOR-SUITE NO. 305 MIAMI FL 33131  11. Pursuant to the provisions of Sections 8971502 and 607 1504. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in 565 State of Florida. Sugh Sections (September vas suphforzed by the conformation submits this statement for the purpose of changing its registered office or registered agent, or both, in 565 State of Florida. Sugh Sections (September vas suphforzed by the conformation is board of directors. Thereby accept the epipolithenial as registered of registered agent, or both, in 565 State of Florida. Sugh Sections (NOTE: Reported Applications or September vas suphforzed by the conformation is board of directors. Thereby accept the epipolithenial as registered or registered agent, or both, in 565 State of Floridas. Sugh Sections (NOTE: Reported Applications or September vas suphforzed by the conformation is board of directors. Thereby accept the epipolithenial as registered or registered agent, or both, in 565 State of Floridas. Sugh Sections (NOTE: Reported Applications or September vas suphforzed by the conformation is board of directors. Thereby accept the epipolithenial as registered or registered agent, or both, in 565 State of Floridas. The proposition is board of directors. Thereby accept the epipolithenial as registered or suphforzed by the conformation is board of directors. Thereby accept the epipolithenial as registered or suphforzed by the conformation is board of directors. Thereby accept the epipolithenial as registered or registered agent, or both, in 565 State or suphforzed by the conformation is board of directors. Thereby accept the epipolithenial as registered agent, or both and acceptable agent and acceptable agent an			81	Name				
25 SOUTH EAST 2ND AVENUE 3RD FLOOR-SUITE NO. 305 MIAMI FL 33131  11. Pursuant to the provisions of Sections 8971502 and 607 1504. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in 565 State of Florida. Sugh Sections (September vas suphforzed by the conformation submits this statement for the purpose of changing its registered office or registered agent, or both, in 565 State of Florida. Sugh Sections (September vas suphforzed by the conformation is board of directors. Thereby accept the epipolithenial as registered of registered agent, or both, in 565 State of Florida. Sugh Sections (NOTE: Reported Applications or September vas suphforzed by the conformation is board of directors. Thereby accept the epipolithenial as registered or registered agent, or both, in 565 State of Floridas. Sugh Sections (NOTE: Reported Applications or September vas suphforzed by the conformation is board of directors. Thereby accept the epipolithenial as registered or registered agent, or both, in 565 State of Floridas. Sugh Sections (NOTE: Reported Applications or September vas suphforzed by the conformation is board of directors. Thereby accept the epipolithenial as registered or registered agent, or both, in 565 State of Floridas. The proposition is board of directors. Thereby accept the epipolithenial as registered or suphforzed by the conformation is board of directors. Thereby accept the epipolithenial as registered or suphforzed by the conformation is board of directors. Thereby accept the epipolithenial as registered or registered agent, or both, in 565 State or suphforzed by the conformation is board of directors. Thereby accept the epipolithenial as registered agent, or both and acceptable agent and acceptable agent an	VILARINHO, CARLOS ALBERTO G							
Addition  SIGNATURE  12. OFFICERS AND DIRECTORS  WAME  13. SITEMET ADDRESS  WAME  LEGRAMANTE, SANDRA T  SITEMET ADDRESS  SITE				82 Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33131  B4 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 997502 and 607.1505 Florids Statutes, the Statutes the Statutes the statement for the purpose of changing its registered agent, or both in M6 State of Rivida. Subj. phempe was applicated by the consoration's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Elefata Statutes.    15	## # = # : : : = : : : : : : : : : : : :							
11. Pursuant to the provisions of Sections 697705(2) and 607.150(4). Find a Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accorpine obligations of, Section 607.0305. Exhibit Englished agent. I am familiar with, and accorpine obligations of, Section 607.0305. Exhibit Englished agent. I am familiar with, and accorpine obligations of, Section 607.0305. Exhibit Englished agent with an accorpine obligation of, Section 607.0305. Exhibit Englished agent agen				\				
Pursuant to the provisions of Sections 6977502 and 6071502 Florida Statutes, byte decorporation submits this statement for the purpose of changing its registered office or registered agent, or both; in \$6' Statistic Floridas, Submit Performs assum/forced by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 0305, Bi-firida Statutes.    Signature   Signature, hyped of printed member of registered agent and statis if appointment as registered of the provisions of the purpose of changing its registered office or provisions of the provis	1410-214	1 1 2 00 10 1	84	City		85 Zip Co	ode	
office or registered agent, or both, in this State of Florida. Such performance of your exportation's board of directors. Thereby accept the appointment as the secret agent, I am familiar with, and accept the obligations of, Seption 607-0096, purished registered agent agent agent and many and accept the obligations of, Seption 607-0096, purished registered agent agent agent and many and accept the obligations of, Seption 607-0096, purished registered agent a	<i>&gt;</i>							
SIGNATURE Signature, had of implationed agent and title if applications.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PSD   DELETE   1.1 TITLE	11. Pursuant t	the provisions of Sections 697.0502 and 607.1505, Florida Statutes,	the above	e-named the com	l corporation submits this statement for the purpose of operation's board of directors. I hereby accept the appoin	manging its r tment as req	egisterea stered	
SIGNATURE Signature, had of implationed agent and title if applications.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PSD   DELETE   1.1 TITLE	agent. I ar	n familiar with, and accept the obligations of, Section 607.0305, Florida	Statutes		In a Oci 1	-21 A	a	
Signature, page of principlement of registered Agent degeneral Agent degeneral required when reinstating)   SALL   SADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   N 12		Lamballu	<u> </u>		MAKCH	81.7	7	
ITTLE PSD VILARINHO, CARLOS ALBERTO G SATI NORTH WEST 64TH STREET #7 STREET ADDRESS MAIN INORTH WEST 64TH STREET #7 STREET ADDRESS STREET ADDRESS MAIN INORTH WEST 64TH STREET #7 STREET ADDRESS STREET A	SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg	gistered Ager	ıt signature				
WAME WAME VILARINHO, CARLOS ALBERTO G STREET ADDRESS WILARINHO, CARLOS ALBERTO G STREET ADDRESS WILL STREET ADDRESS	12.		13.		ADDITIONS/CHANGES TO OFFICERS AN			
STREET ADDRESS DITY. ST. ZIP MIAMI FL 33166 DELETE UTS UTS UEGRAMANTE, SANDRA T STREET ADDRESS ANDREST SANDRAS T STREET ADDRESS DITY. ST. ZIP MIAMI-FL 33166 DELETE UTS UTS UTS UEGRAMANTE, SANDRA T STREET ADDRESS STREET ADDRESS DITY. ST. ZIP MIAMI-FL 33166 DELETE UTS UTS UTS UTS US DELETE US STREET ADDRESS UTS STREET	TITLE	PSD CELETE	1.1 TITLE			☐ Change	Addition	
STREET ADDRESS DITY. ST. ZIP MIAMI FL 33166 DELETE UTS UTS UEGRAMANTE, SANDRA T STREET ADDRESS ANDREST SANDRAS T STREET ADDRESS DITY. ST. ZIP MIAMI-FL 33166 DELETE UTS UTS UTS UEGRAMANTE, SANDRA T STREET ADDRESS STREET ADDRESS DITY. ST. ZIP MIAMI-FL 33166 DELETE UTS UTS UTS UTS US DELETE US STREET ADDRESS UTS STREET	NAME	VILARINHO, CARLOS ALBERTO G	1.2 NAME					
MIAMI FL 33166	STREET ADDRESS		1.3 STREE	f address				
TITLE VTS   DELETE   21 TITLE   Change   Addition   NAME   LEGRAMANTE, SANDRA T   22 NAME   STREET ADDRESS   8311 NORTH WEST 64TH STREET #7   23 STREET ADDRESS   DITY, ST-ZIP   MIAMI-FL-33166   DELETE   31 TITLE   Change   Addition   NAME   STREET ADDRESS   STREET ADDRESS   DITY, ST-ZIP   DELETE   41 TITLE   Change   Addition   NAME   STREET ADDRESS   Addition   NAME   STREET ADDRESS   ADDRESS   DITY, ST-ZIP   Change   Addition   NAME   STREET ADDRESS   ADDRESS   DITY, ST-ZIP   Change   Addition   NAME   STREET ADDRESS   DITY, ST-ZIP   Change   Addition   DELETE   STREET ADDRESS   DELETE	CITY-ST-ZIP			T-ZIP				
LEGRAMANTE, SANDRA T STREET ADDRESS  MIAMI FL 33166  CITY-ST-ZIP  MIAMI FL 33166  CHANGE  3.1 NTILE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  MITTLE	TITLE					☐ Change	☐ Addition	
STREET ADDRESS   S311 NORTH WEST 64TH STREET #7   2.3 STREET ADDRESS   CITY-ST-ZIP   MIAMI-FL-33166   2.4 CITY-ST-ZIP     Change   Addition	NAME	1					ļ	
MIAMI FL-33166		,,,	2.3 STREE	TADDRESS				
TITLE	. 1			_	المدالية المحافظة بالدائد كالماد المان بالمحافظة المدائد المانات	1		
STREET ADDRESS   3.2 NAME   3.2 NAME   3.3 STREET ADDRESS   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP	TILE			-		Change	Addition	
3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   3.4 CITY-ST-ZIP		•	3.2 NAME					
3.4. CITY-ST-ZIP   3.4. CITY-ST-ZIP		<b>.</b>						
DELETE								
A 2 NAME		□ DELETE		1-4F		☐ Change	☐ Addition	
A3 STREET ADDRESS   A4 CITY-ST-ZIP   A4 CITY-ST-ZIP   Change   Addition		G beech			1			
A4 CITY-ST-ZIP	NAME	,		* *DDDCCC			l	
DELETE	STREET ADDRESS				1		į	
NAME	CITY-ST-ZIP	□ actor		T-ZIP		Change	□ Addition	
5.3 STREET ADDRESS	TITLE	[ DELETE						
5.4 CITY-ST-ZIP	NAME			<b></b>				
DELETE 6.1 TITLE Change Addition  6.2 NAME 6.3 STREET ADDRESS  6.4 STREET ADDRESS	STREET ADDRESS				·			
NAME 6.2 NAME 6.3 STREET ADDRESS 6.4 STREET ADDRESS 6.5 STREET ADDRESS	CITY-ST-ZIP			T-ZIP				
STREET ADDRESS 6.3 STREET ADDRESS	TITLE	☐ DELETE	6.1 TITLE			☐ Change	☐ Addition	
since i nounces	NAME		6.2 NAME					
CITY-ST-ZIP 6.4 CITY-ST-ZIP	STREET ADDRESS		6.3 STREE	T ADORESS	1			
	CITY-ST-ZIP		6.4 CITY-S	T-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 an attachment with an address, with all other like empowered.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WARCH 31, 94 (305) 594-907