PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000075420

FILED Feb 10, 1999 8:00 am Secretary of State

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CAMARA	A GIGANTE INC.									
Principal Place	e of Business	Mailing Address				T INDESIMENT IN THE STATE OF THE PROPERTY OF	DITE BOILT REIST	I ure r Olen und		
103 EAST FLAGLER STREET 103 EAST FLAGLER STREET										
MIAMI FL 33131 MIAMI FL 33131						DO NOT WRITE IN THIS SPACE				
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						08/29/1997				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number			Applied For	١.,
21		26				65-0780775		, i	Not Applicable	
Suite, Apt.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired			Additional	1	
22		27	27			5. Certificate of Status Desired			Required	
City & Stat	e	City & State	City & State			6. Election Campaign Financing	- - -		0 May Be	
23	0	28	Cou	ntn.		Trust Fund Contribution			d to Fees	1
Zip	Country	Zip	_	nuy		This corporation owes the cur Personal Property Tax.	rent year int	tangible Yes	□No	
24	9. Name and Address of Curren	29 Agent	30			10. Name and Address of New I	Registered			
-	J. Hame and Address of Odifer	r rrogisterou rigorit		81	Name				·	İ
ELH/	ARRAR, ELI					700 Day No. 10 10 10 10 10 10 10 10 10 10 10 10 10	-61-1	<u> </u>		-
	EAST FLAGLER STREET			82	Street Add	iress (P.O. Box Number is Not Accept	able)			
MIAN	MI FL 33131			83		14.8.13013	e . 45 (2) i	3.		
				84	City	Add	1 1691124 <u>.</u>	85 Zii	o Code	1
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11. Pursuant office or ragent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	tions of, Section 607.0505, Flo	nda Stati	Jies.				changing intment as	registered	
agent. I a SIGNATURE	m familiar with, and accept the obligation of the state o	at and title if applicable. (NOTE	rida Statt : Registered	Jies.		red when reinstating)	DATE			100
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14. I hereby certify that the information supplied with this bing 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 of visuate 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: