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 # P97000079007 (5)

ALIKEL LIMITED, INC.

FILED May 06 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		s LOBEIDDE IIN INTEL INNIL MAIL ANTIL ANTIL ANTIL ANTIL ANTIL II	YBIB IBIH BDHU BBHI HBBI HBBI
4688 NW 103 COURT MIAMI FL 33178	4688 NW 103 COURT MIAMI FL 33178		DO NOT WRITE IN THIS	S SPACE
			3. Date Incorporated or Qualified	
2. Principal Place of Business	To Market Market		09/11/1997 4. FEI Number	
21 17951 SW 27 ST	26 Mailing Address	27 ST	65-0780465	Applied For
Sulte, Apt. #, etc.	Suite, Apt. #, etc.	<i>a</i> 1 31		Not Applicable \$8.75 Additional
22 City & State	27 City & State		5. Certificate of Status Desired	Fee Required
23 MIRAMAR, FL	28 MIRAMAR	FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the c	
24 33029 25 USA	29 33029 30	۸ <i>م</i> نه ٦	Personal Property Tax due June 30.	Yes No
9. Name and Address of Curren			10. Name and Address of New Registered	J Agent
ETZL E R, NATASHA		81 Name		
4688 NW 103 COURT		82 Street Add	ress (P.O. Box Number is Not Acceptable)	*** <u> </u>
MIAMI FL 33178		83		
			·	
		84 City	Fi	L 85 Zip Code
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 (apriliar with, and accept the obligations of Section 607.0505, Florida Statutes.				
SIGNATURE Stanka 21	- lus		4-27	1-98
Signature: typed or printed name of registered age 12. OFFICERS ANI		egistered Agent signature requ	ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIDECTORS IN 10
112. OFFICERS ANI	DELETE	4 4 7071 6		Change Addition
NAME ETZLER, NATASHA	- Settert	1.2 NAME	NATASHA ETZLER 17951 SW 27 ST	C3 Change C3 Hadinon
STREET ADDRESS 4688 NW 103 COURT		1.3 STREET ADDRESS	17951 SW 27 ST	
CITY-ST-ZIP MIAMI FL 33178		1.4 CITY-ST-ZIP	MIRAMAR, FL 33029	
TIFLE	DELETE	2.1 TITLE	7, 11, 11, 11, 11, 11, 11, 11, 11, 11, 1	Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CITY - ST - ZIP		
TITLE	☐ DELETE	3.1 TITLE		Change Addition
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STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	4.4 CITY - ST - ZIP		
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STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	5.4 CITY-ST-ZIP		Change Addition
NAME	_ Dittil	6.2 NAME		T change F Vinetage
STREET ADDRESS		6.3 STREET ADDRESS		
		1		ļ
14. I hereby certify that the information supplied w	ith this filing does not qualify for t	6.4 CiTY-ST-ZiP he exemption stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the information

indicated on this annual report of surpremental annual report is true and accurate and triat my signature shall have the same legal effect as it made under oath, that I am at 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 chapted, or on an attachment with an address!

954-442-8602