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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000081252 (3)

FILED May 04 1998 8:00am Secretary of State

| ļ | IE SPECIAL SERVICES & EX | (PORT INC. | | | | | | |
|---|--|------------------------------------|---|---|--|------------------|----------------------|------------------------------|
| Principal Plac | e of Business | Mailing Address | | | - L KADIINNI IIN KASUL KODES ANDIK RANKI R | DIAN KOTEA TETRA | 11818 (188) 816 | JE 1101 1051 |
| 4820 SW 152 PL. UNIT #E 4820 SW 152 PL. UNIT # 4820 SW 153 PL. UNIT | | | • | | DO NOT WRIT | E IN THIS S | PACE | |
| | | | | | 3. Date Incorporated or Qualified | | | |
| | | | | | 09/18/1997 | | | |
| | Tace of Business 5 NW 36 Street | 28. Mailing Address | , | | 4. FEI Number 65 0783 2215 | - | | oplied For |
| 21 3641 Suite, Apt. | | Suite, Apt. #, etc. | = | | 650765 | | \$8.75 | ot Applicable |
| 22 | | 27 | | | 5. Certificate of Status Desired | | Fee Re | |
| City & Stat | | City & State | | | 6. Election Campaign Financing | | \$5.00 | • |
| Zip | Country | 28 | Country | | Trust Fund Contribution 8. This corporation owes or has p | | Added 1 | |
| 24 3316 | 6 25 V.SA | ├ ┐ ` | 30 | | Personal Property Tax due Jun | _ | ~ · — |] No |
| | 9. Name and Address of Curren | | | | 10. Name and Address of New R | | | |
| VEL | .OZ, SANDRA | | 81 | Name | | | | |
| t . | 0 SW 152 PL, UNIT #E | | 82 | Street Addre | ess (P.O. Box Number is Not Accepta | ble) | | |
| MIA | VMI FL 33185 | | B3 | | | | | |
| Ì | | | 84 | City | - puri | F1 | 85 Zip (| Code |
| 44 Pursuant | to the province of the Andrews | and 607 1509 Florido Ctatudo | a the obour | nomod corn | oration cultivity this atstangent for the | FL | changing it | o rogistored |
| office or r | to the provisions of Skatians 607.0502 registered agent, it, both, it in Stato im familiar with, and accept the public | of Florida Such change was at | uthorized by | the corporati | on's board of directors. I hereby acce | ept the appg | rintment as | registered |
| I. | rn familiar with, and decept including | tons or, Section 607.0505, Flor | nda Siaiules | i. | α | lost | 98 | • |
| SIGNATURE | Signature, typed or control name of rugist feel agent | it and little if applicable (NOTE: | Registered Age | nt signature require | ed when rainstating) | DATE | | |
| 12. | OFFICERS AND | DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFF | | | S IN 12 |
| TITLE | P | DELETE | 1.1 TITLE | | | | 0 | |
| NAME | VELOZ, SANDRA | C DELECT | | I . | | | Change | Addition |
| | | C DEEC'N | 1.2 NAME |) | | | 1 Change | Addition |
| STREET ADDRESS | 4820 SW 152 PL, UNIT #E | | 1.2 NAME 1.3 STREET | ADDRESS | | | 1 Ghange | Addition |
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In nereby certify that the information supplied with thit 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 supplied with a property 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 locality of place true 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 attricting in with an address.

SIGNATURE:

SANDra Veloz

04 05/98 (305) 870-0886