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PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # **P97000081588**

CENTRAL AGENCY OF FLORIDA, INC.

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DIVISION C

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90090 002 ***150.00

	of Business	Mailing Address					
2307 S DOUGLA	AS ROAD	2307 S DOUGLAS ROAD					
SUITE 201	•	SUITE 201	•		DO NOT WRITE IN THIS :	SPACE	
MIAMI FL 33145	•	MIAMI FL 33145	•		3. Date Incorporated or Qualifed		 7
					09/19/1997		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		oplied For
21	·· ·	26			APPLIED FOR 65-08398	64 No	ot Applicable
Suite, Apt. #	# etc .`	Suite, Apt. #, etc.					Additional
22		27		•	5. Certifcate of Status Desired	Fee Re	equired
City & State	<u> </u>	City & State			6. Election Campaign Financing	\$5.00	May Be
23	• •	28			Trust Fund Contribution		to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Inta	ngible	
24	25	29 30	ה		Personal Property Tax.	ŬYes	□No
<u> </u>	9. Name and Address of Current		1		10. Name and Address of New Registered A	Agent	
			- 81	Name		-	
`ĞUEI	RRERO, CLAUDIO				(DO 0 N 1 1 2 N 1 A 2 N 1 A 2 2 N 1 A 2 2 N 1 A 2 2 N 1 A 2 2 N 1 A 2 2 N 1 A 2 2 N 1 A 2 N 1		
2307 S DOUGLAS RD		82 Street Add		Street A	ldress (P.O. Box Number is Not Acceptable)		
STE	201		83				
	AI, FL 33145					_,	
	-		84	City	FL	85 Zip	Code
	0 di 00 di 00 di 00 0	and COZ 4509 Florida Statutos	the above	named c	and the submitted this statement for the surross of a	changing its	registered
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State (of Florida: Such change was auth	norized by	the corpor	ration's board of directors. I hereby accept the appoin	itment as re	gistered
agent. I ar	m familiar with, and accept the obligat	toris of, Section 607.0505, Florid	a Statutes 1				
SIGNATURE		2-22-83			quired when reinstating) DATE		
	Signature, typed to mited name of registered agent		13.	t signature re-	QUIred when reinstating) ADDITIONS/CHANGES TO OFFICERS ANI	D DIRECTO	DRS IN 12
12.	OFFICERS ANI	D DIRECTORS DELETE	1,1 TITLE		ADDITIONO IN MODE TO STATE OF THE	Change	Addition
TITLE]	CHERREDO OLAHRIO	O DELETE			P Duguida Datrigio	X	
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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 it is mornitation 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 permit 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 time empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/18/99

Daytime Phone #