

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

98 DEC 18 PM 6:42

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # P97000084202 (5)
 1. Corporation Name
 FL-MALL CORPORATION



Principal Place of Business 14105 S.W. 81 AVE. MIAMI FL 33158	Mailing Address 14105 S.W. 81 AVE. MIAMI FL 33158
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DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business 21 5601 SW 74 AVE. Suite, Apt. #, etc.	2a. Mailing Address 26 5601 SW 74 AVE Suite, Apt. #, etc.	4. FEI Number 65-0785852	Applied For Not Applicable
22 City & State 23 Miami, FL, USA	27 City & State 28 MIAMI, FL	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
24 Zip 33143	25 Country USA	29 Zip 33143	30 Country USA

3. Date Incorporated or Qualified 09/29/1997	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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9. Name and Address of Current Registered Agent

ALMEIDA, CARLOS
 14105 S.W. 81 AVE.
 MIAMI FL 33158

10. Name and Address of New Registered Agent

81 Name Jose ALMEIDA Jr.	82 Street Address (P.O. Box Number is Not Acceptable) 5601 SW 74 AVE	83	84 City MIAMI	85 State FL	86 Zip Code 33143
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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 familiar with and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE: Jose Almeida Jr. DATE: 9/30/98

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ALMEIDA, JOSE JR. 5601 S.W. 74 AVE. MIAMI FL 33143	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT ALMEIDA, CARLOS 14105 S.W. 81 AVE. MIAMI FL 33158	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ALMEIDA, JOSE M 12221 S.W. 99 STREET MIAMI FL 33186	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000002722250-4 -12/24/98-01083-002 ****150.00 ****150.00
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 on an attachment with an address.

SIGNATURE: Jose Almeida Jr. DATE: 9/30/98 DAYTIME PHONE # 305-595-8927

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (5/98)

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September 30, 1998

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: FL-MALL Corporation
5601 SW 74 AVE
Miami, FL 33143
Tax Id. # 65-0785852

Dear Sir or Madam:

I'm writing as an officer in the FL-MALL corporation to inform you of the following:

1. Mr. Carlos Almeida, who was the registered agent for our corporation has moved out of state. Apparently because of his change of address, a notice of filing never reached us of the corporate annual report.
2. We would like to change the registered agent to Jose Almeida Jr. I have filled out this request in the accompanying form.

I am hereby requesting waiver of the penalties since our corporation is just starting and the corporation does not have the funds to cover the registration and the penalty. I was not informed of the situation until 2 days ago. I called and was advised by Leslie in your staff to submit the payment with a letter requesting a review of our situation.

Thank you for your attention to this matter.



Jose M. Almeida, Jr.
President