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

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

TITLE

NAME

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NAME

1. Corporation	MENT # P9700(ANI, INC.	0084259 (5)									
Principat Plac	ce of Business	Mailing Address						KI BUNI BUN	I MATTI BIBUR IIRBI	01110 IDII 1001	
937 N 31ST AVE 937 N 31ST AVE HOLLYWOOD FL 33021				I			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
6 Principal I	Place of Business	I De Moilles Address					09/29/1997				
21	Place of Businuss	2a. Mailing Address					4. FELNumber 79429	5	 	pplied For	
Suite, Apt.	#. etc.	Suite, Apt. #, etc.	Suite Ant # etc				62 010121			ot Applicable Additiona l	
22		27	,				5. Certificate of Status Desired			equired	
City & Sta	le	Cily & Stale	City & State				6. Election Campaign Financing			May Be	
Zip	Country	28	Cn	. m. l. m. r			Trust Fund Contribution			to Fees	
24	'			Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
24	25 9, Name and Address of Current		30	ı—			Personal Property Tax due Jui			」 №0	
CABRERA, BERNARDO G 937 N 31ST AVE HOLLYWOOD FL 33021				81 82 83	82 Street Address (P.O. Box Number is Not Acceptable)						
				84	City			F	85 Zip	Code	
11. Pursuant office or agent. I a SIGNATURE	to the provisions of Sections 607 0502 registered agent, or both, in the State of am familiar with, and accept the obligation of the oblig							purpose ept the ap	of changing it pointment as	ts registered registered	
12.	OFFICERS AND		Hagistere	d Agei	nt signature i	roquired w	vhen reinstaling) ADDITIONS/CHANGES TO OFF	DATE	ID DIRECTOR	20 IN 12	
TITLE	PD	··· ···· ···· ···		1.1 TITLE			ADDITIONO/OF INNUES TO OFF	IOLIIO AI	Change	Addition	
NAME	CABRERA, BERNARDO G	-	1.2 N								
STREET ADDRESS	937 N 31ST AVE			1.3 STREET ADDRESS							
CITY-ST-ZIP	HOLLYWOOD FL 33021				1.4 CITY - ST - ZIP						
TITLE	VD	DELETE	2.1 10						Change	Addition	
NAME	CABRERA, ALMA W		2.2 N/	.2 NAME							
STREET ADDRESS	- · · · · · · · · · · · · · · · · · · ·			REET.	ADORESS						
CITY-ST-ZIP				ITY-ST-ZIP							
TITLE		☐ DELETE	3.1 TI	TLE					☐ Change	Addition	

CITY-ST-ZIP 6.4 CITY-ST-ZIP 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 eath; 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.

AIMA CABRERA

3.3 STREET ADDRESS

4 3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

4-15-98

☐ Change

☐ Change

Change

Addition

Addition

Addition

FILED

Apr 23 1998 8:00am

Secretary of State