

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE
		Katherine Harris Secretary of State
		DIVISION OF CORPORATIONS

APPROVED
AND
FILED

99 AUG 12 PM 2:07

DOCUMENT # P97000086091

1. Corporation Name

VIAMEN, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

13281 SW 39th TERR.
MIAMI, FL 33175
USA

13281 SW 39th TERR.
MIAMI, FL 33175
USA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 13281 SW 39th Terr.
Suite, Apt. #, etc.

26 13281 SW 39th Terr.
Suite, Apt. #, etc.

22 MIAMI, FL.
City & State

27 MIAMI, FL.
City & State

23 33175 USA
Zip Country

28 33175 USA
Zip Country

24 25

29 30

3. Date Incorporated or Qualified

10/06/1997

4. FEI Number

65-0788679

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MENENDEZ, Ricardo J.
13281 SW 39th Terr.
MIAMI, FL 33175
USA

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Ricardo J. Menendez Ricardo J. MENENDEZ - PRESIDENT

Signature, typed or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<input type="checkbox"/> DELETE
NAME	D MENENDEZ, Ricardo J.
STREET ADDRESS	13281 SW 39th Terr.
CITY-ST-ZIP	MIAMI, FL 33175
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	400002962354--9
1.4 CITY-ST-ZIP	-08/17/99--01066--004
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	***150.00 ***150.00
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 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, with all other like empowered.

SIGNATURE:

Ricardo J. Menendez Ricardo J. MENENDEZ-PRES. 7/26/99 (305)553-0109

CR2E034 (11/98)

Florida Department of Revenue
Division of Corporation
P.O. Box 6327
Tallahassee, Florida. 32314

Re: Viamen, Inc.
Document #P97000086051
ID #65-0788679

Sirs:

The reason of this letter is to ask for a reduction of penalty for late fee.
I can assure you , that I never received the request for payment.
This could happens, as we moved our office twice in about a year.
We always pay our annual report fee on time, it was never my intention
to omit this payment.
We respectfully thank you in advance for your understanding to this matter.

Sincerely yours


Ricardo J. Menendez

13281 SW 39th, Terr.
Miami, Florida. 33175