## 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

## DOCUMENT # P97000089147

1. Corporation Name

THE LONDONO TEN CORP.

## FILED Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90040 042 \*\*\*150.00

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	·									
Principal Place	of Business	M	ailing Address							
14859 S.W. 176	TH STREET	14	859 S.W. 176TH STREET							
MIAMI FL 33187 MIAMI FL 33187					DO NOT WRITE IN THIS SPACE					
								FACE		
							<ol> <li>Date Incorporated or Qualifed</li> <li>10/16/1997</li> </ol>			
2. Principal Pl	ace of Business	2a.	Mailing Address				4. FEI Number		Applie	d For
21		26					65-0787573		Not A	plicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional Fee Required				
22		27	## #*# · · · · · · · · · · · · · · · · ·							
	City & State City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
23	0	28								
Zip	Country	<u> </u>	Zip Country			This corporation owes the current year Intan     Personal Property Tax.	∏Yes	П	No	
24	25	29	tared Apont	30	-		10. Name and Address of New Registered Ag			
ļ	9. Name and Address of Curren	it Kegis	stereu Agent		81	Name	10. Haine and Acades of the Acades	,		
ION	DONO, JULIAN A									
	9 S.W. 176TH STREET				82	Street Addre	ess (P.O. Box Number is Not Acceptable)			1
1	M FL 33187			-	83					$\overline{}$
1					84	City	FL	85 Zi	ip Coo	le ]
11 Pursuant	to the provisions of Sections 607.050	2 and 6	607.1508, Florida Statut	es, the ab	ove	e-named corpo	pration submits this statement for the purpose of ch	nanging	its reg	istered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florid	da. Such change was a , Section 607.0505, Flo	uthorized rida Statu	by tes.	the corporatio	oration submits this statement for the purpose of or in's board of directors. I hereby accept the appointr	ment as	regist	ered
SIGNATURE										
SIGNATURE	Signature, typed or printed name of registered ager				Agen	nt signature required				
12.	OFFICERS AN	ID DIRE		13.		<del></del>	ADDITIONS/CHANGES TO OFFICERS AND	☐ Chang		Addition
TITLE	Р		☐ DELETE	1.1 TIT	LE	1	,	□ Cuant	ye	Addition
NAME	LONDONO, JULIAN A			1.2 NA		j				[
STREET ADDRESS	14859 S.W. 176TH STREET			1.3 STF	REET	TADORESS				\
CITY-ST-ZIP	MIAMI FL 33187			1.4 CIT	Y- \$1	T-ZIP				rm a deltion
TITLE	VPT		☐ DELETE	2.1 ΠΤ	LE		•	Chang	ge	Addition
NAME	LONDONO, MARIA LUISA			2.2 NA	ME					ĺ
STREET ADDRESS	5731 S.W. 62ND TERRACE			2.3 STF	REET	TADDRESS	١			
CITY-ST-ZIP	MIAMI FL 33143			2.4 C∏	Y-S	ST-ZIP	1		~	
TITLE ;	— •		☐ DELETE	3.1 TITI	Œ.		- man and a second of the seco	∐ ∪nanç	ge ~~	Addition
NAME	• • ,			3.2 NA	ME	ŀ				
STREET ADDRESS	•			3.3 STF	REET	T ADDRESS				·
CITY-ST-ZIP				3.4. CIT	ry-s	ST-ZIP				
TITLE	·		☐ DELETE	4.1 TITI	LE			Chang	ge /	Addition
NAME				4. 2 NA	ME					
STREET ADDRESS				4.3 ST	REET	TADDRESS				
CITY-ST-ZIP				4.4 CIT	Y-S	T-ZIP	•	/		
TITLE			☐ DELETE	5.1 TIT			/	☐ Chang	g <del>e</del>	☐ Addition
NAME	ls .			5.2 NA	ME					(
STREET ADDRESS				5.3 STR	REET	TADDRESS				ĺ
CITY-ST-ZIP				5.4 CIT		T-ZiP				
TITLE			☐ DELETE	6.1 TIT	Œ			Chang	ge	☐ Addition
NAME				6.2 NA	ME					
STREET ADDRESS				6.3 ST	REET	TADDRESS				
1				0.4.07		T 710				i

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 of the reserved or true 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, of on an adachment with an address, with all other like empowered.

**SIGNATURE:** 

QUIRED OFFICER OR DIRECTOR