## 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

DOCUMENT # P97000091062 (4)

**MEGABYTE AMERICA CORPORATION** 

| Principal Place of Business                   | Ma |
|---|----|
| 4444 1-11 44 <del>4</del> 14 4 <del>4</del> 4 |    |

## **FILED** Apr 27 1998 8:00am Secretary of State



| 1 in capar riac      | 20 OI DO311033   | Maining Address   |  |   |
|----------------------|--|---|--|---|
| 8322 NW 681          |  | 8322 NW 68TH STREET   |  |   |
| MIAMI FL 33          | 166  | MIAMI FL 33166  |  | DO NOT WRITE IN THIS SPACE  |
| 1                    |  |   |  | 3. Date Incorporated or Qualified   |
|                      |  |   |  | ,   |
| 2. Principal P       | Place of Business  | 2a. Mailing Address   | <del></del>                                | 10/23/1997<br>4. FEI Number Applied Fo  |
|                      | NW # 36" ST  | 26 8180 NW S  | OC CT                                      | 1 / - 000 - 0   |
| Suite, Apt           |  | Suite, Apt. #, etc  | 30.31                                      |   |
| 22 # 40              | <u> </u>   | 27 # 403  |  | 5. Certificate of Status Desired \$8.75 Additional Fee Required   |
| City & Stat          | WI, FC   | City & State 28 Y11Amul F   | <i>عر</i>                                  | 6- Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees  |
| Zip<br>3为(           | Country<br>25 USA  | 29 33166 3  | Country<br>SQ                              | This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes M No  |
|                      | 9. Name and Address of Current   |   | 901  | 10. Name and Address of New Registered Agent  |
| CC                   | RNANDEZ, EDUARDO   |   | 81 Name                                    | (a and Language of Links Hollistonian Differi   |
|                      | NNANDEZ, EDUANDU<br>1 BRICKELL KEY DRIVE SUITE 40                                    |   |  |   |
| 1                    |  |   | 82 Street                                  | Address (P.O. Box Number is Not Acceptable)   |
| Mir                  | AMI FL 33131   |   | 83   |   |
|                      |  |   | 83   |   |
|                      |  |   | 84 City                                    | 85 Zip Code   |
| 44 Durana            | 40   |   |  | FL 19 Appeara   |
| office or r          | to the provisions of Sections 607.0502<br>registered agent, or both, in the State of | ' arid 607.1508, Florida Statules<br>of Florida, Such change was au | s, the above-named<br>thorized by the corr | corporation submits this statement for the purpose of changing its registe poration's board of directors. I hereby accept the appointment as registered |
| agent. I a           | m familiar with, and accept the obliga   | tions of Section 607.0505, Flori                                    | da Statutes.                               | solution a sound of directors. The boy decope the appointment as registere  |
| SIGNATURE            |  |   |  |   |
|                      | Signature, typud or printed name of registered ages                                  |   | Registered Agent signature                 |   |
| 12.                  | OFFICERS AND   |   | 13.  | ADDITIONS/CHANGES TO OFFICERS AND DIBECTORS IN 12   |
| TITLE                | DP   | ☐ DELETE  | 1.1 TITLE                                  | Change Add  |
| NAME                 | HOLGADO, EUGENIO   |   | 1.2 NAME                                   |   |
| STREET ADDRESS       | 8322 NW 68TH STREET  |   | 1.3 STREET ADDRESS                         | kisomm ar 30 sl   |
| CITY - ST - ZIP      | MIAMI FL 33166   |   | 1.4 CITY-ST-ZIP                            | MIAMI FL 33166  |
| TITLE                |  | ☐ DELETE  | 2.1 TITLE                                  | Change Add  |
| NAME                 |  |   | 2.2 NAME                                   |   |
| STREET ADDRESS       |  |   | 2.3 STREET ADDRESS                         |   |
| CITY-ST-ZIP          |  |   | 2. 4 CITY - ST - ZIP                       |   |
| TiTLE                |  | ☐ DELETE  | 3.1 TITLE                                  | Change Addi   |
| NAME                 |  |   | 3.2 NAME                                   |   |
| STREET ADDRESS       |  |   | 3.3 STREET ADDRESS                         |   |
| City-St-Zip          |  |   |  |   |
| TITLE                |  | DELETE  | 3.4. City-ST-ZIP<br>4.1 TITLE              | ☐ Change ☐ Addi   |
| NAME                 |  | bud occert  | 4. 2 NAME                                  | Citaling City Appli   |
| STREET ADDRESS       |  |   |  |   |
|                      |  |   | 4.3 STREET ADDRESS                         |   |
| CITY-ST-ZIP<br>TITLE |  | DELETE  | 4.4 CITY-ST-ZIP<br>5.1 TITLE               |   |
| 1                    |  | L. Detter   |  | Change Addi   |
| NAME                 |  | <b>/</b> \  | 5.2 NAME                                   |   |
| STREET ADDRESS       |  | 1 \   | 5.3 STREET ADDRESS                         |   |
| CITY-ST-ZIP          |  |   | 54 CITY-ST-ZIP                             |   |
| TITLE                |  | DELETE  | 61 TITLE                                   | ☐ Change ☐ Addi   |
| NAME                 |  | 1 1.  | 62 NAME                                    |   |
| STREET ADDRESS       |  | 1 11  | 63 STREET ADDRESS                          |   |
| CITY-ST-ZIP          |  |   | 64 City-St-ZiP                             |   |
|                      | adily that the information assessing with  | this files had a got as all to the                                  | the everntion state                        | d in Section 119.07(3)(i), Florida Statutes. I further certify that the informati   |

indicated on this annual report or supplemental annual of officer or director of the corporation or the receiver or the Block 12 or Block 13 if changed, or on an attachment true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an npowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: