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 #

P97000092607 (5)

MIAMI GIRLS, INC.

FILED Apr 23 1998 8:00am Secretary of State



						-		
Principal Place	e of Business	Mailing Address				-{	DING BING BING	1011 (011 (00)
2628 NW B6TH AVE CORAL SPRINGS FL 33065		2628 NW 86TH AVE CORAL SPRINGS FL 33065				DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified 10/27/1997		
2. Principal Place of Business 2a. Mailing Address				CL DO		4. FEI Number	Ar	oplied For
1 282	28 NW 86th AVE	26 $(0, 4)$				P7-011802IZ		ot Applicable
Suite, Apt.		Suite Apr #, otc. 27 33075-9609			9	5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State	spenich Theida	28 CORAL Springs, Florida			orida	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 4] 330	15 Country 25 U.S.V	32775	30 15	uniry	A	8. This corporation owes or has paid the cu	rrent year Int	tangible →No
1 330	9. Name and Address of Current	Registered Agent	130 1	جب	(12	Personal Property Tax due June 30. 10. Name and Address of New Registered		140
Di	ESTIVO, JOSEPH			81	Name	io, tallo che di con la	- goin	
2628 NW 86TH AVE				82	Chanal Addr	COS (D.O. Day Murchas in Mas Appearable)		
CORAL SPRINGS FL 33065				02	Street Addre	dress (P.O. Box Number is Not Acceptable)		
-			1	83				
				84	City		85 Zip (Code
					•	FL	_ ^	
11. Pursuant t office or re agent. I ar	to the provisions of Sections 607 0502 egistered agent, or both, in the State on familiar with and accept the obliga-	and 60 7,16 08, Florida Statut of Florida, Superchange was sous of Johnson 607,0505, Florida	es, the a authorize orida Sta	bove- ed by tutes.	named corporati	oration submits this statement for the purpose only board of directors. I hereby accept the app	f changing it pointment as	ls registered registered
SIGNATURE	Signature, typecki printed name or register of right	oraca bile a apposable (NOT	F: Bonistore	id Agen	signaturé requiré	ed when reinstaling) DATE	73	10
12.		OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AN	DIRECTOR	RS IN 12
TITLE	PD	DELETE	1.1.1	IILE			Change	Addition
NAME (COLON, CESAR M		12 N	AME	[
STREET ADDRESS	2628 NW 86TH AVE			1.3 STREET ADDRESS				j.
CITY-ST-ZIP	CORAL SPRINGS FL 33065		1.4 0	ITY-ST	ZIP			
TITLE	VD	☐ DELETE	2.1 T				L Change	Addition
NAME	RESTIVO, JOSEPH		2.2 N					
STREET ADDRESS	2628 NW 86TH AVE			2.3 STREET ADDRESS				ļ
CITY-ST-ZIP	CORAL SPRINGS FL 33065	DELETE	2. 4 CITY-ST-ZIP TE 3.1 TITLE		- ZIP		T Observe	- Labora
TITLE	STD Lopez, Alexander	☐ ACTELE					L Change	L Addition
NAME Street Address	2828 NW 86TH AVE		3.2 N		ODRESS			
CITY-ST-ZIP	CORAL SPRINGS FL 33065		- 1		ł			}
TITLE	COINE OF THINGO I E GOOG	DELETE		3.4. CITY-ST-ZIP 4.1 TITLE			Change	Addition
NAME			4.21		}			
STREET ADDRESS					DDRESS			
CITY-ST-ZIP				4.4 CITY - ST - ZIP				}
TITLE	DLLETE		5.1 T	5.1 TITLE			Change	Addition
NAME			5.2 N	AME	1			
STREET ADDRESS			5.3 S	TREET A	DDRFSS			
CITY-ST-ZIP			·54C	-5.4 CITY-ST-ZIP				
ITLE		DELETE	6 1 TITLE				Change	☐ Addition
NAME			6.2 N	AME	1	,		}
STREET ADDRESS			6.3 \$	TREET A	DDRESS			ļ
CITY-ST-ZIP			6.4 0	ITY-SI	ZIP	s		

14. Thereby 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 received or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or open attachment with an address.