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 # P9700094730 (3) M.P. RESIDENCE INC.

Principal Place of Business 311 S.W. 71ST AVENUE

2. Principal Place of Business

SMITH, MARIANELA 311 S.W. 71ST AVENUE

Suite, Apt. #, etc.

SIGNATURE:

City & State

MIAMI FL 33144

21

22

23

24

Zip

Country

9. Name and Address of Current Registered Agent

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

28

29

311 S.W. 71ST AVENUE MIAMI FL 33144

FILED Jan 21 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be Added to Fees

Yes Yes

Not Applicable

3. Date incorporated or Qualified 11/03/1997

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

4. FEI Number

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

MIAMI FL 33144				<u> </u>		
			83			
			84	City	85 Zig	Code
					<u> </u>	
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 Signature, typed or printed name of registered agent and title if applicable. INOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	RS IN 12
TITLE		DELETE	1.1 TITLE		Change	
NAME	SMITH, MARIANELA		1.2 NAME			-
STREET ADDRESS	311 S.W. 71ST AVENUE		1.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAM! FL 33144		1.4 CITY-S	F-ZIP		
TITLE			2.1 TITLE		☐ Change	Addition
NAME	SMITH, PABLO		2.2 NAME			
STREET ADDRESS	311 S.W. 71ST AVENUE	2	2.3 STREET	ADDRESS		Į
CITY - ST- ZIP	MIAMI FL 33144	_ [2	2. 4 CITY-S	T~ZIP	·	[
TITLE		DELETÉ S	3.1 TITLE		☐ Change	Addition
NAME		1 3	3.2 NAME	1		ľ
STREET ADDRESS		3	3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4. CITY - S	T-ZIP		
TITLE		DELETE 4	1.1 TITLE		☐ Change	Addition
NAME		1 4	£ 2 NAME	}		
STREET ADDRESS			1.3 STREET	ADDRESS		1
CITY-ST-ZIP			1.4 CITY-S	-ZIP		
TITLE		DELETE	5.1 TITLE		Change	☐ Addition
NAME		1.5	5.2 NAME			İ
STREET ADDRESS		5 5	3.3 STREET	ADDRESS		[
CITY-ST-ZIP			5.4 CITY - S'	-ZIP		
TITLE		DELETE	3.1 TITLE		Change	☐ Addition
NAME		•	5.2 NAME	ļ		1
STREET ADDRESS		1 6	3.3 STREET	ADDRESS		
CITY-ST-ZIP			4 CITY - S		15.0-15.140.07(0)(3.5)	- to factor average
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.						

Country

81 Name

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