## 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 # P97000094864 (0)

**EUREKA DEVELOPMENT COMPANY NO. 4** 

**FILED** Apr 24 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						FILLDINGS	18 18111 188(1 88(1) 081f3	ARIH BAMA MAN	H MLABI HANNA AN	
1350 S.W. 57TH AVENUE SUITE 207 MIAMI FL 33144		1350 S.W. 57TH AVENUE Suite 207 Miami Fl 33144			DO NOT WRI	TE IN THIS S	SPACE			
						3. Date Incorp 11/03/19	orated or Qualified	t		
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Numbe				pplied For
21		<del> </del>	26				0792607			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.	. <del> </del>			<u> </u>				Additional
22		27	27			5. Certificate of	of Status Desired	(X)		equired
City & Stat	e	City & State	City & State			6. Election Ca	mpaign Financing		\$5.00	May Be
23		28	· • · · · · · · · · · · · · · · · · · ·			1	Contribution			to Fees
Zip	Country	Zip		intry		8. This corpor	ation owes or has	paid the cur	rent year Int	tangible
24	26		30				operty Tax due Ju			_ No
	9. Name and Address of Curr	ent Registered Agent		21		10. Name and	Address of New I	Registered A	<b>Agent</b>	
GUERRA, JORGE L				<b>81</b> Na	me So	ler, Jos	e I.			ļ
MIAMI CENTER, 10TH FLOOR						ess (P.O. Box Number is Not Acceptable)				
	1 SOUTH BISCAYNE BLVD.									
ML	AMI FL 33131-4325			83	350	S.W. 57	Ave S	uite	207	
	上。			84 Cit	ly			F		3144
	- $        -$				Mia			<u> </u>		
11. Pursuant office or r	to the provisions of Sections 607.05 egistered agent of both, in the Sta	502 and 607.1508, Florida Statute te of Florida. Such change was a	es, the at uthorized	bove-nar d by the	ned corp corporati	ioration submits thi ion's board of dire	is statement for the ctors. I hereby acc	purpose of ept the app	changing it ointment as	is registered registered
agent. I a	egistered agent of both, in the Sta im familiar with, and accept the obli	igations of, Section 607.0505, Flo	rida Stat	tutes.			,			
SIGNATURE					·······························					
12.	Signature Typed or printed name of registered a	igent and title it applicable (NOTE ND DIRECTORS	Registered	d Agent sig-	nature require	od when reinstating)	CHANCES TO OF	DATE	DIRECTOR	OC IN 10
TITLE	D	DELETE	1.1 Ju	TI F		P	CHANGES TO OFF	ICERS AND	A Change	Addition
NAME	SOLER, JOSE I		1.2 NA			•				Ploation
STREET ADORESS	1350 S.W. 57TH AVENUE S	SLIITE 207		TREET ADDA	tee					
CITY-ST-ZIP	MIAMI FL 33144			ITY-ST-ZIP	233					
TITLE		DELETE	2.1 10	_			**************************************		Change	☐ Addition
NAME			2.2 NA							
STREET ADDRESS				ireet addr	FSS					
CITY-ST-ZIP				ITY-ST-ZIP	!					
TITLE	DELETE			TLE					Change	Addition
NAME			3.2 NA	AME						1
STREET ADDRESS				IREET ADDR	ESS					
CITY-ST-ZIP				ITY-ST-ZIP						
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	4.1 111		1	T-11.11.11.11.11.11.11.11.11.11.11.11.11.			Change	Addition
NAME			4.2 N	AME						
STREET ADDRESS			4.3 ST	REET ADDR	ESS					
CITY-ST-ZIP			4.4 CI	TY-ST-ZIP						
TITLE		DELETE	51111			*** * **	• •		Change	Addition
NAME			52 NA	<b>AME</b>	1					
STREET ADDRESS			12 8.6	REET ADDR	ESS					
CITY-ST-ZIP			5.4 CI	TY-ST-ZIP						
TITLE		☐ DELETE	6 1 T)T	TLE					Change	Addition
NAME			62 NA	AME						
STREET ADDRESS			63 ST	REET ADDR	ESS					
CITY-ST-ZIP		<b>\</b>	6.4 CO	TY-ST-ZIP						
14. I hereby o	certify that the information supplied on this applied	with this thing does not qualify for	the exe	mption t	stated in !	Section 119.07(3)(	i), Florida Statutes	I further ce	tify that the	information
officer or Block 12	cortify that the information supplied on this annual report or supplemen director of the corporation or the re or Block 13 if changed, or on an all	ceiver Attelee empowered to e achment with an address.	xecute t	his repo	rt as requ	ired by Chapter 6	07, Florida Statutes	s; and that n	ly name app	pears in

SIGNATURE: