## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/08: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$150).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDÁ DEPARTMENT OF STATE

Sandra B./Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9700095019 (0)

## FILED Sep 09 1998 8:00am Secretary of State

	O GO, INC.	Mailing Address		
9700 SW 168T MIAMI FL 3315	'h st <b>re</b> et	9799 SW 168TH STREET MIAMI FL 33157		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
			.,	11/05/1997
2. Principal Place of Business 2. Malling Address		Dicie Hut	4. FEI Number Applied For	
			Picie Hwy	65-079629/ Not Applicable
22 22		Sulte, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State City & State		City & State	<u></u>	6. Election Campaign Financing \$5.00 May Be
23 28 MIAMI			FLA	Trust Fund Contribution Added to Fees
Zip	Country	Zip 22. (7	Country	8. This corporation owes or has paid the current year intangible
24	[25]	29 1111	30 /4/	Personal Property Tax due June 30. Yes No
TOD	9. Name and Address of Curre	nt Registered Agent	B14 Name	10. Name and Address of New Registered Agent
TODIOG, FICTOR				DWARD P. LUDOVICI, ESA
21431 S.W. 94 AVENUE				ress (P.O. Box Number is Not Acceptable)
MIAMI FL 33189			83	7415 S. DIXIE HWY
			84 City	1AM F FL 85 Zip Code 7
11. Pursuant to the provisions of sections 607.0502 and 607,1508, Figrida Statutes, the above-named corporation submits this statement for the purpose of changing its registered				
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 mange was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I arry/lapping with, and accept the objection 607.0505, Florida Statutes.				
SIGNATURE	I I MADA BATTA	hom.		8/25/91
	Signature, typed or printed name of registere is Se		TE: Registered Agent signature requ	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	MICHAEL TODIS	C O LI DELETE	1.1 TITLE	h- 1-1 Vition
NAME	21431 5. W. 94 A	/ i	1.2 NAME	
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TITLE		DELETE	5.1 TITLE	dition 1
NAME			5.2 NAME	C. MEC. W. CO. P. O. P. JUL
STREET ADDRESS			5.3 STREET ADDRESS	July 1
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	800002636848 V/
STREET ADDRESS			6.3 STREET ADDRESS	-09/11/9301025019 / \hat{\gamma}
CITY-ST-ZIP	L		6.4 CITY-ST-ZIP	***15门, ①门 Y Include Statutes Lituriber certify that the information

4. 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 chapter 607 on an attachment with an address.

CHATURE OF STATE OF THE STATE O

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