## 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

## P97000096532 (1)

## **FILED** Jun 30 1998 8:00am Secretary of State

_	TAMILT GROUP								
Principal Pla	ce of Business	M	ailing Address				1 sabilita sin santi sadit Balli dasti Balli satit	ILA AISA BIIMA I	)
2210 COLLIN	NS AVE #1523		210 COLLINS AVE #1:	523					
MINIMI DEFIC		"	armin oction to well				DO NOT WRITE IN THIS	SPACE	
	•						3. Date Incorporated or Qualified		
	<u>.</u>						11/12/1997		
Principal Place of Business     The Principal Place of Business			2a. Mailing Address 26				4. FEI Number 650795823		pplied For lot Applicable
Suite, Apt. #, etc. Suite, Apt.				t. #, etc.					Additional
22 27							5. Certificate of Status Desired	Fee F	Required
City & Sta	ite .		City & State				6. Election Campaign Financing	\$5.00	May Be
23		28		<del>,</del>			Trust Fund Contribution	Added	to Fees
Zip	, <del> </del> -	ıntry	Zφ	Cour	niry		8. This corporation owes or has paid the cu	_ ′ .	
24	25	29	4-1-4 44	30			Personal Property Tax due June 30.		_l No
		dress of Current Regis	tered Agent		81	Nama	10. Name and Address of New Registered	Agent	
	NCHEZ, WILLIAM .			Į'	ן יי	Name ,			
10621 N. KENDALL DR., #208 MIAMI PL 33176					82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	2				83		'		
	#: **			)	84	City	FI	<b>85</b> Zip	Code
office or	registered agent, or b am familiar with, and a	poth, in the State of Flori accept the obligations o	da Such change was f, Section 607,0505, Ft	authorized orida Statu	l by th utes.	ne corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointment as	s registered
	Signature, typed or printed or	OFFICERS AND DIREC			Agent (	signature require	d when reinstaling) DATE	D DIDECTO	DC IN 10
12.	DP	OLUCIONS MICHORITIC	DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AN		Addition
NAME	RODRIGUEZ, M	ARIO		1.2 NA		-			
STREET ADORESS	60.000.000			1.2 167 1		- 1	KICKEDO MUDGOS		
CITY-ST-ZIP	MAMI BEACH I			1251		ADBECC	ZZIO COLINI AR.	c	
					REET AD	DORESS	ZZIO COLINI Are. NI AMI BEOCLE 33/3	r	
			DELETE	1.4 CIT	REET AD	DDRESS Zip	KICAPSO ULLOQUE 221.0 COLINI pre. pliani Beoclifi 33/3		Addition
TITLE	OVS	FL 33139	DELETE	1.4 CIT 2.1 TITU	REET AD Y-ST-Z LE	DDRESS Zip	ZZIO COLINI AR.  PLIAMI BEOCLIFE 33/3	Change	☐ Addition
NAME	<b>Ö</b> VS <b>A</b> GUDELO, MAI	FL 33139 RTA	☐ DELETE	1.4 CIT 2.1 TITU 2.2 NAI	REET AD Y-ST-2 LE ME		TICAPIO UUDGOE ZZIO COLINI AMP. MI AMI BEOCLIFI 33/31		☐ Addition
NAME STREET ADDRESS	AGUDELO, MAI 2210 COLLINS	FL 33139 RTA AVE., #1523	☐ DELETE	1.4 CIT 2.1 TITU 2.2 NAI 2.3 STF	REET AD Y-ST-Z LE ME REET AD	DRESS	TICAPIO UUDGOE ZZIO COLINI AMP. MI AMI BEOCLIFE 33/3		☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	<b>Ö</b> VS <b>A</b> GUDELO, MAI	FL 33139 RTA AVE., #1523	☐ DELETE	1.4 CIT 2.1 TITU 2.2 NAI 2.3 STF 2. 4 CIT	REET AD Y-ST-2 LE ME REET AD TY-ST-	DRESS	richeso thoses zz1.0 colini pre. riani Beocl, F( 33/3'		☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	AGUDELO, MAI 2210 COLLINS	FL 33139 RTA AVE., #1523		1.4 CIT 2.1 TITU 2.2 NAI 2.3 STF 2. 4 CIT 3.1 TITU	REET AD Y-ST-Z LE ME ME HEET AD TY-ST- LE	DRESS	TICAPIO UUDGOE ZZIO COLINI pre. Riami Beocl, F( 33/3"	☐ Change	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	QVS AGUDELO, MAI 2210 COLLINS MIAMI BEACH I	FL 33139 RTA AVE., #1523		1.4 CIT 2.1 TITU 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITU 3.2 NAI	REET AD Y-ST-Z LE ME HEET AD TY-ST- LE ME	DDRESS ZIP	TICAPIO UUDGOE ZZIO COLINI PRE. PLI AMI BEOCL, EL 33/3'	☐ Change	
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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OVS AGUDELO, MAI 2210 COLLINS NIAMI BEACH I	FL 33139 RTA AVE., #1523	[] DELETÉ	1.4 CIT 2.1 TITU 2.2 NAI 2.3 SIF 2.4 CIT 3.1 TITU 3.2 NAI 3.3 SIF 3.4 CIT 4.1 TITU 4.2 NAI	REET AD Y-ST-Z LE ME REET AD IY-ST- LE ME REET AD IY-ST- LE REET AD	DDRESS ZIP DDRESS ZIP	TICAPIO UUDGOE ZZIO COLINI AME. MI AMI BEOCL, EL 33/31	☐ Change	☐ Addition
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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OVS AGUDELO, MAI 2210 COLLINS NIAMI BEACH I	FL 33139 RTA AVE., #1523	☐ DELETE	1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.2 NAI 3.3 STF 3.4 CIT 4.1 TITI 4.2 NA 4.3 STF 4.4 CIT	REET AD  Y - ST - 2  LE  ME  ME  HET AD  HET ST - ST - LE  ME  ME  HET ST - ST - LE  ME  HET ST - ST	DDRESS ZIP DDRESS ZIP DDRESS	TICAPIO UUDGOE ZZIO COUNI AME. MI AMI BEOCL, FC 33/3'	☐ Change	☐ Addition
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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 cupylimental arinual 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 of the