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 # P97000098037 (9)

FILED Mar 11 1998 8:00am Secretary of State

LIDANO	HAVESTWEINTS & SERV	TOES, INC.					 	II 4100 (101 1) (400 410) 4	((()
Dringing! Olace	of Dunioses	Basilina Bal	d						
,			Mailing Address				,		
7391 SOUTHWEST 16TH STREET 7391 SOUTHWEST 16TH S MIAMI FL 33155 MIAMI FL 33155			TREET						
MINITE 90100							DO NOT WRITE	IN THIS SPACE	
							3. Date Incorporated or Qualified		
- 5: · · · · · · · · · · · · · · · · · ·		1					11/18/1997	 	
			ailing Address				4. FEI Number 65-0794515	}	pplied For
21 26 Suite, Apt. #, etc. Suite, Apt. #, et			nt # etc				65-0194515	¢0.75	ot Applicable Additional
22 27			, , , , , , , , , , , , , , , , , , , ,				Certificate of Status Desired		teguired
City & State	 .		City & State				6. Election Campaign Financing	\$5.00	May Be
23		28	28				Trust Fund Contribution		to Fees
Zip Country		Zip	Zip Country				8. This corporation owes or has paid the current year Intangible		
24	25	29		30			Personal Property Tax due June		□ No
	9. Name and Address of Cu	rrent Registered Ag	ent		1		10. Name and Address of New Re	gistered Agent	
	ERILAWYER			81	Name	الما	urdes vildria		ŀ
343 ALMERIA AVENUE			82	Street	Addres	ss (P.O. Box Number is Not Acceptab	le)		
CORAL GABLES FL 33134				83		q_{l}	3.W. 16 377		
				•	'				
				84	City		La f		Code
A Comment of the Control of the Cont						MIA		FL 23	765
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the at office or registered agent, or both, in the State of Florida. Such change was authorized agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida State						rporation	n's board of directors. I hereby accep	it the appointment as	registered
agent. Lar	ida Statute	s.			2-3-9	200			
SIGNATURE	Registered Ad	ent signatur	e required	when reinstating)	2-3-7	<u> </u>			
12.		t agent and tice if applicable AND DIRECTORS	14016	13.	ion eignoio	0.045.00	ADDITIONS/CHANGES TO OFFIC		RS IN 12
TITLE	PSTD		DELETE	1.1 TITLE		P5	ተን	Change	Addition
NAME	VIOLRIA, LOURDES			1.2 NAME		LO	URDES VILORIA	n =	
STREET ADDRESS 7391 SOUTHWEST 16TH STREET			1.3 STREET ADDRESS 73		73	91 5.W. 1674. STA	ee.		
City-St-ZiP	MIAMI FL 33155			1.4 CITY-	ST-ZIP	M	IAMI, PL. 33155		l.
TITLE		I	DELETE	2.1 TITLE	•			Change	☐ Addition
NAME				2.2 NAME					
STREET ADDRESS				2.3 STRE€	t address				
CITY-ST-ZIP				2. 4 CITY-	ST-ZIP	ļ			
TITLE		Į.] DELET e	3.1 TITLE				Change	Addition
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREE	T ADDRESS				
CITY-ST-ZIP				3.4. CITY-	ST-ZIP				
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NAME				4.2 NAME					
STREET ADDRESS				4.3 STREE	T ADDRESS				
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NAME				5.2 NAME					
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP			nei ere	5.4 CITY-1	ST-ZIP	ļ		Chance	Aphilitian
TITLE		L	DELETE	61 TITLE				L Change	☐ Addition
NAME				6.2 NAME					
STREET ADDRESS					T ADDRESS				Ī
CITY-ST-ZIP	atile that the information appella	d with this files door	not outlifu for	6.4 CITY-		l Ce	action 110 07/2)/i) Florido Statutos II	(- inda and a bin-

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.

2-3-98