## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT** 

## **FILED** Mar 16 1998 8:00am Sandra B. Mortham Secretary of State

	1998	DIVISION OF C	ORPORATIONS	Secretar	y of State
	MENT # P9700	00099230 (9) LIGHTING, INC.			
20. 5-					AND HIGH IIIA NAMA AND AND AND AND
Principal Plac	ce of Business	Mailing Address		1 10011001 110 1017 1011 0011 0011	### #### #############################
DCOTA- A412		DCOTA- A412			
GRIFFING RD. DAMA FL 33004		DANIA FL 33004		DO NOT WORK IN	TURN 0040E
				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
				11/24/1997	
2. Principal Place of Business 21 3633 S.W. 3044 Avenue Suite, Apt. #, etc. 22		26. Mailing Address 26. 3633 S.W. 30 AJENUE Suite. Apt #, etc. 27. City & State		4. FEI Number	Applied For
					Not Applicable
				5. Certificate of Status Desired	\$8.75 Additional
City & State				6. Election Campaign Financing	\$5.00 May Be
23 FORT	LAVOERDALE	28 FORT LAUDE		Trust Fund Contribution	Added to Fees
Zip	Country	7m	Country USA	8. This corporation owes or has paid	
24 333	اسر. ک ، ال 25 ال 25 . الم . S . الم . S . الم . ا	_ · · + · · · · · · · · · · · · · · ·	30 USA	Personal Property Tax due June 30 10. Name and Address of New Regis	
AD	VAZOZA, COMAS, DE TORRED		B1 Name		torou Agent
	1 MADEIRA AVE.	d I EMMANDEZ-FRAG	82 Street	LUIS LOPEZ NEGRO	
	DRAL GABLES FL 33134		363	Address (P.O. Box Number is Not Acceptable)	
-	/	7	83		
	//	<b>,</b>	84 City		85 Zip Code
		<i></i>	' <b>*</b>	ort lavor kome	FL 38312
office or	to the provisions of Sections 607. registered agent, or both, in the S	0502 and 607.1508, Florida Statute La e ol Flo <u>ri</u> da. Such change was a	es, the above-named uthorized by the corp	corporation submits this statement for the purporation's board of directors. I hereby accept t	ose of changing its registered he appointment as registered
agent 1 a	am familiar with, and or upt or of	Jugatiens of Section 607.0505, Flo	rida Statutes.	_	/9/1998
SIGNATURE	Signature, typed or payon harve of requirees	1 3 of aries the st upplies the (NOTE	PER NEERO Hingistured Agent signature		DATE.
12.	OFFICERS	A ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	
TITLE		DELETE	1.1 TITLE	CHAIRMAN	Change Addition
NAME			1.2 NAME	MIS LOPES - NEGRO 3633 S.W. BOTH. AUGH	)E
STREET ADDRESS			1.3 STREET ADDRESS	PORT LANDERDANE, FL	29812
CITY+ST-ZIP TITLE		DELETE	1.4 CITY - ST - ZIP 2 1 TIJLE	Fee House April , FF	Change Addition
NAME	1	<u></u>	2 2 NAME		
STREET ADDRESS	1		2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4 CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME			4.1 ())LE 4.2 NAME		C change C Addition
STREET ADDRESS			4.3 STREFT ADDRESS		
CITY-ST-ZIP			4.4 CiTY-ST-ZIP		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Therese	5.4 CITY - ST - ZIP		Charles T Address
		DELETE	61 TITLE		Change Addition
TITLE					
NAME			6.2 NAME		
		1			

or trustce empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in