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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000099950 (2) DOCUMENT #

CIRILO ENTERPRISES, INC.

22315 SW 101 AVE RD 22315 SW 101 AVE RD MIAMI FL 33190 MIAM! FL 33190 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/21/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year intangible 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** CIRILO. ISRAEL JR 22315 SW 101 AVE RD 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33190** 83 84 City Zip Code 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 change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NO1): Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Addition DELETE Change TITLE 1.1 TITLE Forcel Cirllo Jr. 22015 S.W. 101 A Ve. Rd. NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS Miami, FL 33190 CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE Change Addition 21 TITLE Theresa S. Cirilo NAME 22 NAME 22315 S.W. 101 AVI. Rd. STREET ADDRESS 2.3 STREET ADDRESS Miami IFL 33190 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Change Addition 4 2 NAME

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.

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

14. Thereby 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

DELETE

DELETE

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

"Thorous 5 (1:11) 4-10.58 3115-378-1985

FILED

May 04 1998 8:00am

Secretary of State

Change

Addition

Addition