## 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 # P97000103566 (0)

THREE NICKELS AND A DIME, INC.

Tringipa Tidoo di Basino
214 ESPANOLA WAY
MIAMI BEACH FL 33139

## **FILED** May 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 214 ESPANOLA WAY MIAMI BEACH FL 33139 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/09/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-0801108 21 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 Trust Fund Contribution 23 Added to Fees 28 Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 30 24 25 29 Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** QUESADA, ABRAHAM 214 ESPANOLA WAY Street Address (P.O. Box Number is Not Acceptable) 82 MIAMI BEACH FL 33139 83 84 City 85 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, typed or presend name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE **SEQUI, CAROLINE** 1.2 NAME NAME 214 ESPANOLA WAY STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33139 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE QUESADA, ABRAHAM NAME 2.2 NAME **214 ESPANOLA WAY** STREET ADDRESS 2.3 STREET ADDRESS MIAMI BEACH FL 33139 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETÉ Addition TITLE 31 TITLE Change **SEGUI, CAROLINE** NAME 3.2 NAME 214 ESPANOLA WAY STREET ADDRESS 3.3 STREET ADDRESS MIAMI BEACH FL 33139 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS TESS 6.4 CITY-ST-ZIP

Breby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information cated 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 error 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 x 12 or Block 13 if changed, or on an attachment with an address.