## 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** #

## Feb 09 1998 8:00am Secretary of State

A WOU	TORGET PLACEMENT OF T	LOHIDA, INO						
Principal Place	e of Business	Mailing Address				-		001  100
1327 N.E. 125 STREET 1327 N.E. 125 STREET						1		
NORTH MIAMI FL 33161 NORTH MIAMI FL 33161								
						DO NOT WRITE IN THIS SPACE	CE	<del></del>
						3. Date Incorporated or Qualified 12/11/1997		
2. Principal Place of Business 2a. Mailing Add			ddress			4. FEI Number		plied For
21		26				65-0801266		Applicable
Suite, Apt.	#, etc.	<u></u> 1	Suite, Apt. #, etc.			5. Certificate of Status Desired	8.75 A Fee Re	dditional
City & State		City & State						
City & State	o .	<b>├</b> ──	28				\$5.00   Added to	
Zip	Country	Zip	Cou	intry		8. This corporation owes or has paid the current		
24			30	o, the corporation of the pale the content year in			No I	
	9. Name and Address of Curre		1501	1	······································	10. Name and Address of New Registered Age	nt	
MO	GEE, RICHARD			81	Name			
1327 N.E. 125 STREET				B2	Etropt Addro	ess (P.O. Box Number is Not Acceptable)		
NORTH MIAMI FL 33161				02	SHOOL Addie	ass (F.O. Box Number is Not Acceptable)		ľ
				83				
				84	City	8	5 <b>Z</b> ip C	,ode
					-	FL	` I .	
11. Pursuant office or reagent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607,1508, Florida State of Florida Such change was patiens of, Section 607,0505, I	utes, the al s authorize Florida Stat	bove- d by t tutes.	named corpo the corporation	oration submits this statement for the purpose of chapping board of directors. I hereby accept the appoint	anging its ment as i	registered registered
SIGNATURE								
Signature, typed or pentied native of nigestored agent and title if applicable (NOTE: R				d Agent	signature require	d when reinstating) DATE	SECTOR	
12.	OFFICERS AN	ID DIRECTORS	13. 1.1 Ti	T1 C	<u> </u>	ADDITIONS/CHANGES TO OFFICERS AND DIF	Change	S IN 12 Addition
TITLE	MORCATE, CARLOS	Otterit	1.1 M				Onlinga	La radiilari
NAME	6240 S.W. 3RD STREET				DODGEC			ŀ
STREET ADDRESS	BUANDAMON CLASSIC				DDRESS			ľ
CITY-ST-ZIP TITLE				ITY-ST-	· ZIP		Change	Addition
NAME				2.1 TITLE 2.2 NAME		_		
STREET ADDRESS	6240 S.W. 3RD STREET		· ·		DDRESS			ŀ
CITY-ST-ZIP	PLANTATION FL 33317			2. 4 CITY-ST-ZIP				
TITLE				3.1 TITLE		D	Change	☐ Addition
NAME				3.2 NAME		<del></del>	-	į
STREET ADDRESS	1632 S.W. 29 TERRACE, AP	T. #2			DORESS			
CITY-ST-ZIP	FT. LAUDERDALE FL 33312	·· · · ·	1	ITY-ST				
TITLE		DELETE	4.1 Ti				Change	☐ Addition
NAME			4. 2 N	IAME				
STREET ADDRESS			4.3 \$	TREET A	DORESS			
CITY-ST-ZIP			4.4 C	ITY-ST-	- ZIP			
TITLE		☐ DELETE	5.1 Ti				Change	Addition
NAME			5.2 N	AME				1
STREET ADDRESS			5.3 S	TREET A	DDRESS			1
CITY-ST-ZIP			5.4 0	ITY-ST-	ZIP			
TITLE		DELETE	61 TI	TLE			Change	Addition
NAME			6.2 N	AME				
STREET ADDRESS			6.3 \$	TREET A	DDRESS			
CITY - ST - ZIP			6.4 C	ITY-ST-	ZIP			
14. I hereby of	on this annual report or supplied	with this filing does not qualify	for the executate an	emption of the terminal of the	on stated in S	Section 119.07(3)(i), Florida Statutes. I further certify e shall have the same legal effect as if made under	that the oath: the	information

mental amilian reports rule and accurate and mat my signature sharinave are same legal effect as it made under oath; that I am a fireceiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in in attachment with an address. officer or director of the corporation of Block 12 or Block 13 if changed, or block 15 if changed, or

ALOS MONCOTE