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

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT # RIO FRIO, INC. Principal Place of Business 15302 SW 142ND TERR. MIAMI FL 33196 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 1201 HAYS STREET

ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000108558 (2)

FILED Apr 30 1998 8:00am Secretary of State

Mailing Address 15302 SW 142ND TERR. MIAMI FL 33196 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>12/29/1997</u> Applied For 2a. Mailing Address <u>5 +080325</u>0 26 6 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 28 Trust Fund Contribution Country Zip Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. □ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 CORPORATION SÉRVICE COMPANY 410 ピロノ 82 てベレ TALLAHASSEE FL 32301-2525 83 IAM 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 lamiliar with, and accept the obligations of, Section 607,0508 Florida Statutes. ELID MEDINA SIGNATURE ature required when reinstating) 12, OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE MEDINA, VICKI 1.2 NAME NAME 15302 SW 142ND TERR. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33196 CITY-ST-ZIP 1.4 CITY-ST-ZIP ... DELETE Change Addition TITLE 2.1 TITLE NAME MEDINA, ELIO 22 NAME 15302 SW 142ND TERR. STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33198 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 TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE ☐ Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-S1-ZIP CITY-ST-ZIP DELETE Addition TITI F 6.1 TITLE NAME 6.2 NAME **STREET ADDRESS** 6.3 STREET ADDRESS 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 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 eath; that I am an officer or director of the corporation or the acceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed to be an alternment with an adaptes.