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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

``Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000001199

1. Corporation Name

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90275 032 ***150.00

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Principal Plac	ce of Business		-ilias Address				_				
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						•	3. Date Inco	rporated or Qualifed	d		
<u> </u>								1/06/199	8		
- 2200	Place of Business W. 84 ST.		Mailing Address	84 S	ĊТ		4. FEI Numb	^{per} 65-0802	2384	A	oplied For
21 3300 Suite, Apt		26	Suite, Apt. #. etc.	0-7 12	J I •		_				lot Applicable
BAY		27	BAY 2				5. Certifcate	of Status Desired			Additional
City & Sta			City & State				Clockion C	ampaign Financing			Required
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33018	8 25	29	33018	30				Property Tax.		Yes	X □No
·	9. Name and Address of Cur	rrent Regis	tered Agent				•	d Address of New	Registered	Agent	
37.3	MAY AMEDA				81	Name N A N (CY OTER	0			
	ANCY OTERO	3	· ·		82			imber is Not Accept	table)		
	761 S.W. 21 TERF	₹.	•					21 TERR			
M I	TAMI, FL. 33145				83	•					
					84	City				85 Zip	Code
44 Dimeria	to the provisions of Sections 607.				Ш	MIA			FL	_ 31	3145
ii. Pursuant	to the provisions of Sections 607.0	0502 and 60					ation submits th	nis statement for the	a niirnaea af	i changing it:	s registered
office of I	registered agent, or both, in the Sta	ate of Florid	a. Such change was	s authorize	ed by t	the corporation'	's board of direc	ctors. I hereby acce	ent the appo	intment as re	egistered
office of t	registered agent, or both, in the Standard familiar with, and accept the ob	ate of Florid	a. Such change was	s authorize	ed by t atutes.	the corporation	's board of dire	ctors. I hereby acce	ept the appo	intment as re	egistered
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I hereby 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 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, with all other like empowered.

SIGNATURE:

4/27/99

(305)231-0808

Daytime Phone #