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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

Zip

DOCUMENT # P98000009452

1. Corporation Name

SATURNO MANAGEMENT COMPANY, CORP.

Country

Principal Place of Business	Mailing Address
7260 SW 13 Street	7260 SW 13 Street
Miami, F1 33144	Miami, Fl 33144

2a. Mailing Address

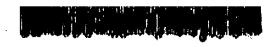
Suite, Apt. #, etc.

City & State-

Zip

FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90080 035 ***150.00



Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

	DO NOT WRITE IN THIS SPACE						
3. Date Incorporated or Qualifed							

01/29/1998

65-0811335

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

CRESPO, RODOVALDO 7260 SW 13 Street Miami, Fl 33144	29 Current Registered Agent	30	81 82 83		Personal Property Ta 10. Name and Address		Yes Agent	⊠ No
CRESPO, RODOVALDO 7260 SW 13 Street Miami, Fl 33144	Current Registered Agent		82			of New Registered	Agent	
7260 SW 13 Street Miami, Fl 33144			82					
7260 SW 13 Street Miami, Fl 33144				Street Ad				
Miami, Fl 33144				Oueer Ad	idress (P.O. Box Number is No	t Acceptable)		
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			84	Ciby		n .		Cada
			04	City		FL	85 Zip	Code
 Pursuant to the provisions of Sections 6 office or registered agent, or both, in the agent. I am familiar with, and accept the 	e State of Florida. Such char	ige was author	ized by	the corpora	orporation submits this stateme ation's board of directors. I her	nt for the purpose of eby accept the appoi	changing its ntment as re	registered egistered
SIGNATURE								
Signature, typed or printed name of regis	• • • • • • • • • • • • • • • • • • • •			nt signature requ	ared when reinstating)	DATE		
	ERS AND DIRECTORS		13. .1 MILE		ADDITIONS/CHANGE	S TO OFFICERS AN	D DIRECTO	ORS IN 12 Addition
. 101 01	-						L) Grange	□ vanaou
NAME CRESPO RODOVALD			2 NAME					
STREET ADDRESS 7260 SW 13 Stre				TADDRESS	•			
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TIME	□ D		1 TITLE				Change	Addition
NAME			2 NAME			*, "		
STREET ADDRESS	r	6	3 STREET	1 ADORESS			•	
CITY-ST-ZIP 14. I hereby certify that the information supp			4 CITY-ST					

Country

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:

Rodovaldo Crespo

4/30/99

(305) 267-0119