

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000023401

1. Corporation Name  
ANAGA, INC

Principal Place of Business  
10505 NW 29 TERRACE  
MIAMI, FL 33172

Mailing Address  
10505 NW 29 TERRACE  
MIAMI, FL 33172

REINSTATEMENT 99  
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified  
09/09/98

4. FEI Number  
65-0841192

Applied For  
Not Applicable

21. Suite, Apt. #, etc.

21a. Suite, Apt. #, etc.

5. Certificate of Status Desired  \$6.76 Additional Fee Required

22. City & State

22a. City & State

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

23. Zip

Country

23a. Zip

Country

7. This corporation owes the current year intangible Personal Property Tax.  Yes  No

8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROMAN MARTINEZ  
7025 SW 74 STREET  
MIAMI, FL 33143

01. Name

02. Street Address (P.O. Box Number is Not Acceptable)

03.

04. City

FL

05.

Zip Code

11. Pursuant to the provisions of Sections 607.3002 and 607.1800, Florida Statutes, the above-named corporation certifies the 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 607.0600, Florida Statutes.

SIGNATURE

Signature of Current Registered Agent and Not a Director

Signature of New Registered Agent (Not a Director)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PSID  DELETE  
ROMAN MARTINEZ  
7025 SW 74 ST  
MIAMI, FL 33143

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE  
JOSE MARTINEZ VALENZUELA  
1419 TRILLO ST  
CORAL GABLES, FL 33134

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

Change  Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

Change  Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

Change  Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

Change  Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

Change  Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Change  Addition

7.1 TITLE

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY-ST-ZIP

Change  Addition

8.1 TITLE

8.2 NAME

8.3 STREET ADDRESS

8.4 CITY-ST-ZIP

Change  Addition

000003060470-6  
-12/03/99--01089--021  
\*\*\*758.75 \*\*\*758.75

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(c), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that no director 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 file 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 filers empowered.

SIGNATURE:

*[Handwritten Signature]*

10-01-99

KE