1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000034905

1. Corporation Name

SUPER PINOY PUBLICATIONS, INC.

Mailing Address

May 07, 1999 8:00 am Secretary of State

05-07-1999 90032 021 ***150.00



13800 S.W. 8TH STREET. #386 13800 S.W. 8TH STREET. #386 MIAMI FL 33184 MIAMI FL 33184 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 04/16/1998 FEI Number 2a. Mailing Address Applied For Principal Place of Business 0828 526 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. П 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Country Country Zip Zip This corporation owes the current year Intangible **™**No 30 29 Personal Property Tax. 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent BARRAMEDA, MARIA ROSARIO 82 Street Address (P.O. Box Number is Not Acceptable) 14238 S.W. 45TH STREET **MIAMI FL 33175** 83 Zip Code 84 City 85 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Banameda nt and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ DELETE Change ☐ Addition TITLE 1.1 TITLE BARRAMEDA, MARIA ROSARIO 1.2 NAME NAME 6444 LA COSTA DRIVE, #204 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33433** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition VSD □ DELETE 2.1 TITLE TITLE IBAY, ANTONIO P 22 NAME NAME 14238 S.W. 45TH STREET 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33175** 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE ABAIN, VIRGINIA 3.2 NAME NAME 3357 CONFETTI LANE 3.3 STREET ADDRESS STREET ADDRESS MARGATE FL 33063 CITY-ST-ZIP 3.4, CITY-ST-ZIP DELETE ☐ Change ☐ Addition 4.1 TITLE TITLE NAME CRUZ, EMMANUEL R 4.2 NAME 16 ROYAL PALM WAY, #105 STREET ADDRESS 4.3 STREET ADDRESS **BOCA RATON FL 33432** 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change 5.1 TITLE TITLE 5.2 NAME NAME LEE ABAIN, JOSE VIVIEN 5.3 STREET ADDRESS 3357 CONFETTI LANE STREET ADDRESS 5.4 CITY-ST-ZIP MARGATE FL 33063 CITY-ST-ZIP 61 TITLE ☐ Change ☐ Addition □ DELETÉ TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. 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 supplied with an imag does not qualify for the exemption stated in Section 13.07(5)(f), Florida Statutes. I failed cathly with the full flow indicated on this annual report or suppliemental 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 attaching in with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

(11/98) **CR2E034**