

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

99 DEC -3 PM 3:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

DOCUMENT # P98000036194

1. Corporation Name

6494 Investments, Inc.

Principal Place of Business

Mailing Address

6494 Coral Way  
Miami, FL. 33155

6494 Coral Way  
Miami, FL. 33155

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

4-21-98

4. FEI Number

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Perez, Jorge L.  
14030 Lake Candlewood Court  
Miami Lakes, FL. 33014

81 Name

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

83

84 City

FL

85 Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE Vice-President ☐ DELETE

1.1 TITLE

NAME Perez, Jorge L.

1.2 NAME

STREET ADDRESS 14030 Lake Candlewood Court

1.3 STREET ADDRESS

CITY-ST-ZIP Miami FL. 33014

1.4 CITY-ST-ZIP

TITLE President ☐ DELETE

2.1 TITLE

NAME Hernandez, Julio

2.2 NAME

STREET ADDRESS 5510 S.W. 147 Court

2.3 STREET ADDRESS

CITY-ST-ZIP Miami, FL. 33185

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

3.1 TITLE

NAME ☐ DELETE

3.2 NAME

STREET ADDRESS ☐ DELETE

3.3 STREET ADDRESS

CITY-ST-ZIP ☐ DELETE

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE

NAME ☐ DELETE

4.2 NAME

STREET ADDRESS ☐ DELETE

4.3 STREET ADDRESS

CITY-ST-ZIP ☐ DELETE

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE

NAME ☐ DELETE

5.2 NAME

STREET ADDRESS ☐ DELETE

5.3 STREET ADDRESS

CITY-ST-ZIP ☐ DELETE

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE

NAME ☐ DELETE

6.2 NAME

STREET ADDRESS ☐ DELETE

6.3 STREET ADDRESS

CITY-ST-ZIP ☐ DELETE

6.4 CITY-ST-ZIP

200003070652--5  
-12/15/99--01025--003  
\*\*\*\*\*150.00 \*\*\*\*\*150.00

KE

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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-30-99

Date

Daytime Phone #

CR2E034 (5/99)

# *ME Land Services, Inc.*

November 29, 1999

Divisions of Corporation  
Annual Report/Reinstatement Section  
P.O. Box 6327  
Tallahassee, FL 32314-6327

Re: 6494 Investment, Inc.  
P98000036194

To whom it may concern,

After further review by my accountant as to the companies status of licences and taxes, the accountant found that the annual report was never filed or paid. These forms were never received by us, since I am the only person who receives the mail. Once we determined what was opened in terms of taxes, we immediately contacted the Florida Department of State to request the blank application.

It is for these reasons stated above that I hereby request that you accept the check for \$150. in good faith. We have always been ~~aware~~ <sup>aware</sup> of what taxes need to be paid. Therefore, please abate the penalty for not filing on time under reasonable cause.

If you have any questions, please don't hesitate to give me a call.

Thanking you in advance,

*Julie Fernand*