

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90184 021 ***150.00

DOCUMENT # P98000043186

1. Corporation Name

EXECUTIVE FINANCIAL INVESTMENTS, CORP.

Principal Place of Business

7951 S.W. 40TH STREET
SUITE 206
MIAMI FL 33155

Mailing Address

7951 S.W. 40TH STREET
SUITE 206
MIAMI FL 33155

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/13/1998

4. FEI Number

65-0835709

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

21 15001 N.W. 42ND AVE

Suite, Apt. #, etc.

22 Suite #205

City & State

23 MIAMI FL

Zip

24 FL 33054

Country

25 DADE

2a. Mailing Address

26 15001 N.W. 42ND AVE

Suite, Apt. #, etc.

27 Suite #205

City & State

28 MIAMI, FL.

Zip

29 33054

Country

30 DADE

9. Name and Address of Current Registered Agent

DIAZ, OSVALDO J
7951 S.W. 40TH STREET
SUITE 206
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name

ORLANDO GONZALEZ

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

15001 N.W. 42ND AVE

83

84 City

MIAMI

FL

85 Zip Code

33054

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

Orlando Gonzalez

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE PVST ☐ DELETE

NAME GONZALEZ, ORLANDO
STREET ADDRESS 7951 S.W. 40TH STREET
CITY-ST-ZIP MIAMI FL 33155

TITLE D ☐ DELETE

NAME GONZALEZ, ORLANDO
STREET ADDRESS 7951 S.W. 40TH STREET
CITY-ST-ZIP MIAMI FL 33155

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PVST

☒ Change

☐ Addition

1.2 NAME

GONZALEZ, ORLANDO

1.3 STREET ADDRESS

15001 N.W. 42ND AVE

1.4 CITY-ST-ZIP

MIAMI, FL. 33054

2.1 TITLE

D

☒ Change

☐ Addition

2.2 NAME

GONZALEZ, ORLANDO

2.3 STREET ADDRESS

15001 N.W. 42ND AVE

2.4 CITY-ST-ZIP

MIAMI, FL. 33054

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE: x

Orlando Gonzalez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Orlando Gonzalez

Date

4/27/99 (305) 685-1515
Daytime Phone #

0225168

CR2E034 (1/98)