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03-03-1999 90078 004 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P98000046685**1. Corporation Name

A & B HOLDINGS, INC.

Principal Place of Business Mailing Address								
1402 TANGIER STREET CORAL GABLES FL 33134		1402 TANGIER STREET CORAL GABLES FL 33134			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed 05/26/1998		
Principal Place of Business Za. Mailing Address						4. FEI Number	· Applied.For-	
21		26				65-0837680	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				E Continue of Status Desired	5 Additional	
22		27				Fee	Required	
City & Stat	e	City & State			6. Election Campaign Financing Trust Fund Contribution S 5.00 May Be Added to Fees			
Zip 24	Country 25	Zip 29	Cour	ntry		8. This corporation owes the current year Intangible Personal Property Tax.	□No	
	9. Name and Address of Current					10. Name and Address of New Registered Agent		
				81 Nan	ne			
RODRIGUEZ, JOSE A P.A. SUN TRUST BUILDING				82 Stre	et Addre	dress (P.O. Box Number is Not Acceptable)		
	BRICKELL AVE., SUITE 950		}	83				
MIA	MI FL 33131		İ			los!	Zin Codo	
				84 City		FL 85 ²	Zip Code	
SIGNATURE	rm familiar with, and accept the obligation of t	t and title if applicable (NOTE:			re required	when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS/CHANGES TO OFFICERS AND DIRECTIONS AND DIRECTIO	CTORS IN 12	
TITLE	D Posibent	DELETE	1.1 TIT	LE		☐ Chan		
NAME	MARRERO, BEATRIZ	—	1,2 NA			·		
STREET ADDRESS	ALCO TANGED OFFICE		L	REET ADDRÉ	ss	,		
CITY-ST-ZIP	CORAL GABLES FL 33134			Y-ST-ZIP				
TITLE	Vice President	☐ DELETE	2.1 TIT			☐ Char	nge	
NAME	Dobres OBANDO		2.2 NA	ME			-\	
STREET ADDRESS	3700 DURANGO ST	- 1:	2.3 ST	REET ADDRE	ss	الريد		
CITY-ST-ZIP	ancal bables A.	33134	2. 4 CF	TY-ST-ZIP	\perp	<u> </u>		
TITLE		☐ DELETE	3.1 TIT	LE		☐ Char	nge 🔲 Addition	
NAME			3.2 NA	ME				
STREET ADDRESS			3.3 ST	REET ADDRE	.ss		~	
CITY-ST-ZIP			3.4. CI	TY-ST-ZIP				
TITLE		☐ DELETE	4.1 TIT	Œ		□ Char	nge	
NAME			4. 2 N				ļ	
STREET ADDRESS			4.3 ST	REETADORE	SS	,		
CITY-ST-ZIP				Y-ST-ZIP			nge	
TITLE		☐ DELETE	5.1 TIT			Char	ige Addition	
NAME			5.2 NA		.00		.	
STREET ADDRESS	1			REET ADDRE	.33	•		
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP		Char	nge Addition	
TITLE	1	☐ DELETE	6.1 (1)	LC		Char	ião Monitori	

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 chapted for on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS