Feb 22, 1999 8:00 am

Secretary of State

02-22-1999 90015 029 ***150.00

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

DOCI MENT

POCUMENT # P98000055156											
1. Corporation Name RENE BARAJAS ENTERPRISES, INC.						- }					
DEINE DA	Anajas entenrhises, ir	VC.					£ 10 E 11	 	(2)	811 8 1 0 1186 11	ADI CHER DEL EGGE
											OOL OLEHO BEHT HORE
Principal Place		Mailing Address	•								
108 NW LEMON		108 NW LEMON ROAD LAKE PLACID FL 33852			-						
LAKE PLACID F	L 33852	LAKE PLACID PL 33832						DO NOT WRI	TE IN THIS	SPACE	
						3	Date Incor	porated or Qualifed			
						ļ	06/19/19	98			
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address				I. FEI Numbe	er			Applied For
21		26	26				59	1-3525	೦೦೩		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				Carifoota	-f Status Desired		\$8.75	5 Additional
22		27	27				. Certificate	of Status Desired	u	Fee	Required
City & State	e	City & State	City & State			6	6. Election Ca	ampaign Financing		\$5.0	0 May Be
23	28						Trust Fund	Contribution		Adde	d to Fees
Zip	Country	Zip Cou				8	8. This corporation owes the current year Intangible				_ {
24	25	29	30					roperty Tax.		Yes	□No
Name and Address of Current Registered Agent						10	D. Name and	Address of New	Registered	Agent	
STATLER, PHILLIP W 3200 US HWY 27 SOUTH, STE. 306 SEBRING FL					Name				•		ľ
					Street Add	dress ((P.O. Box Nu	mber is Not Accept	able)	-	
						·`	· 		<u> </u>		
SEBI	AING FL			83				•		•	J
				84	City					85 Z	ip Code
								<u></u>	FL	.	i i
11. Pursuant	to the provisions of Sections 607.09 egistered agent, or both, in the Stat	502 and 607.1508, Florida Statut	es, the a	bove	-named cor	rporation	on submits th	is statement for the	purpose of	changing	its registered
office of re agent. I ai	egistered agent, or both, in the Stat m familiar with, and accept the oblig	gations of, Section 607.0505, Flo	rida Stat	u by lutes.	une corporar	IIION S L	board or direc	Nors. Thereby acce	pruie appoi	inijent as	registered
SIGNATURE							• •				
	Signature, typed or printed name of registered a	<u></u>			t signature requi	red when			DATE		
12.	_ <u></u>	AND DIRECTORS	13.				ADDITIONS	CHANGES TO OF	FICERS AN		
TITLE	0	☐ DELETE	1.1 TI						1.	. Chang	le [] Vocinou
NAME	BARAJAS, RENE		ı	AME,					•		ļ
STREET ADDRESS	P.O. BOX 1743		1.3 5	TREET	ADDRESS			•	•		
CITY-ST-ZIP	LAKE PLACID FL 33870			ITY-ST	-ZiP			· 			[7] A 4-P61
TITLE	U	☐ DELETE	2.1 1					1 - T	•	Chang	e 🗌 Addition
NAME	BARAJAS, ELVIA	2.21		AME	.						
STREET ADDRESS			2.3 S	TREET	ADDRESS						
CITY-ST-ZIP	LAKE PLACID FL 33870		_	ZITY-S	T-ZIP						
TITLE		☐ DELETE	3.1 ∏		1			• ; •	-	Chang	je 🗌 Addition
NAME			32 N					، س		5 1 -	. ~
STREET ADDRESS			33S	TREET	ADDRESS						1
CITY-ST-ZIP			_	ITY-S	T-ZIP						
TITLE		☐ DELETE	4.1 ∏	ITLE	1			•		Chang	ge 🗀 Addition
NAME			4.21	IAME					•	•	ļ
STREET ADDRESS			4.3 S	TREET	ADDRESS						ļ

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.

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

TITLE

NAME

TITLE

NAME

941) 699-9906

Addition

Addition

Change

Change