Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90199 029 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCU	MEN # P98000	062393				j · (
1. Corporation										
COMALI	PERFORMANCE, INC.					1 444114 11 EIR 18181 (BUS 8921 ABUS 881))		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	me ini ieti '	
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}]			1888 1888 1888	
Principal Place of Business Mailing Address										
2858D SOUTH DIXIE HIGFHWAY 2858D SOUTH DIXIE HIGFHWAY										
NARANJA FL 3		MARANJA FL 33030				DO NOT WRITE IN	ruie enaci	=		
							INIS SPACE			
Į.						3. Date Incorporated or Qualified				
}				·		07/15/1998				
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	L		ied For	
21 26						65-0849728			Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.			3.			5. Certificate of Status Desired			ditional	
22						S. Cerbicale of California	F	ee Req	uired	ı
City & State City & State						6: Election Campaign Financing			lay Be 😁	
23 28					_	Trust Fund Contribution Added to Fees				
Zip.	Country	Zip	Co	untry		8. This corporation owes the current year Intangible				
24				Personal Property Tax.				s]No	
	9. Name and Address of Current	t Registered Agent				10. Name and Address of New Registe	red Agent			ı
				81 Name	1/	ctor J RAMOS				1
LEY	va, mirta			20 5000	Addis	es (C.O. Bay Number in Not Acceptable)				
28580 SOUTH DIXIE HIGFHWAY				82 Street	Auure 1 d	3580 South DIXIE	dis FH	Wa	V	
NAR	ANJA FL 33030			83	I	23 60 300,11 01,110	0			
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11. Pursuant	to the provisions of Sections 607,0502	2 and 607.1508, Florida : of Florida, Such change :	Statutes, the a was authorize	abova-named d by the come	corpor	ration submits this attachment for the purpor i's board of directors. I hereby accept the a	ppointment	as regi:	stered	
agent. I a	m lamillar with and account the obligat	ions of, Section 607.050	5, Florida Sta	tutes.		ration submits this statement for the purpor's board of directors. I hereby accept the s				
SIGNATURE	X//		VICTOR	d Agent algorature	MD.	1-30 -	<u> </u>			
0,0	Signalure, typed or printed name of registered agent				adrayeq .	ADDITIONS/CHANGES TO OFFICER		CTOR	© IN 12	(11/98)
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICER	□ Ch		Addition	Ξ
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NAME	VICTOR J.RAMOS		1.2 6	IAME	ĺ					2
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with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information that an additional report is true and accurate and that my signature shall have the same legal effect as if made under path; that I am an accepter or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in tachment with an address, with all other like empowered. 14. I hereby certify that the information supplied indicated on this annual report or supporting officer or director of the corporation with re Block 12 or Block 13 if changed open as

6.4 CITY-ST-ZIP

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR