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

DOCUMENT # P98000080444

1. Corporation Name

FAGOMAR CORPORATION

Principal Place of Business

Mailing Address

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90297 006 ***150.00



, mopar, acc or success	•			<i>}</i>	
8165 RALEIGH ST. APT 1516 ORLANDO FL 32835-2221	6165 RALEIGH ST. AF ORLANDO FL 32835-2			DO NOT WRITE IN	THIS SPACE
				3. Date Incorporated or Qualifed 09/14/1998	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
<u></u>	26			59-3534276	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	28 Zip 29	Country 30		This corporation owes the current yes Personal Property Tax.	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
GALLARDO, FELIX J	<u> </u>	81	Name		
6165 RALEIGH ST, APT 1516		82 Street Add		ss (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32835-2221		83			
		84	City		FL 85 Zip Code
11. Pursuant to the provisions of Sections	607.0502 and 607.1508, Florida S	Statutes, the above-	named corpo	ration submits this statement for the purpo	se 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 appagent. 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13 12. ☐ Addition DELETE 1.1 TITLE ☐ Change TITLE GALLARDO, FELIX J 1.2 NAME NAME 6165 RALEIGH ST. APT 1516 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32835-2221 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change □ DELETE 2.1 TITLE TITLE GONZALEZ, ANGELES 2.2 NAME NAME 6165 RALEIGH ST, APT 1516 2.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32835-2221 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change □ DELETE 3.1 TITLE TITLE GALLARDO, FELIX F 3.2 NAME NAME 6392 HUNTSVILLE ST 3.3 STREET ADDRESS STREET ADORESS ORLANDO FL 32819 3.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY- ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition 6.1 TITLE ☐ Change □ DELETE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 a other like empowered.

CR2E034 (11/98)