FILE NOW: FILING FEE AFTER MAY 151 IS \$550.00

PROFIT -CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P98000080536

FILED Mar 24, 1999 8:00 am Secretary of State 03-24-1999 90065 036 ***150.00

Principal Place of Business Mailing Address	-	
13101 N.W. 182ND STREET 13101 N.W. 182ND STREET		
MIAMI FLORDIA. 33016 MIAMI FLORIDA. 33016 DO NOT WRITE IN THIS SPACE	DO NOT WRITE IN THIS SPACE	
3. Date Incorporated or Qualifed		
10/15/98		
2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0868768		
21 26 NG API		
City & State City & State 5 Flection Campaign Financing \$5.00 May		
23 Trust Fund Contribution Added to Fe		
Zip Country Zip Country 8. This corporation owes the current year Intangible		
24 25 29 30 Personal Property Tax. Yes XN	>	
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent		
81 Name		
82 Street Address (P.O. Box Number is Not Acceptable)		
EMILIO ARANGO		
15242 N.W. 88TH PLACE 83	-	
MIAMI FLORIDA. 33018		
FL		
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 regist 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 register	ed	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	1	
SIGNATURE Signature used or scretch page of considered applicable (NOTE: Registered applicables (NOTE: Registered applicables required when rejustating) DATE		
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	N 12	
Change C	Addition	
EMILIO ARANGO	ļ	
15242 N.W. 88 PLACE		
STREET ADDRESS MIAMI FLORIDA. 33018 1.33 (REET ADDRESS) 1.4 CITY-ST-ZIP	:	
	Addition	
TITLE VP LICHARGE L NAME NAME 22 NAME LICHARGE L NAME 22 NAME	I	
NAME 15242 N.W. 88TH PLACE: 23STREET ADDRESS 23OT 8	!	
MIAMI FLORIDA. 33010 CITY-ST-ZIP 2.4 CITY-ST-ZIP		
TIDE TO DELETE 31TIME Change	Addition	
RAMON LEON NAME 11315 S.W. 46TH STREET 32 NAME	i	
STREET ADDRESS MIAMI FLORIDA. 33175		
CITY-ST-ZIP 34. CITY-ST-ZIP		
TITLE DELETE 4.1 TITLE Change	Addition	
NAME 4.2 NAME		
STREET ADDRESS 43 STREET ADDRESS	l	
CITY-ST-ZIP 4.4 CITY-ST-ZIP	Addition	
mes ,	Addition	
NAME 5.2 NAME	Ì	
STREET ADDRESS 5.3 STREET ADDRESS 5.4 STREET ADDRES		
CITY-ST-ZIP	Addition	
G 2 NAME	,	
CA STREET ADDRESS		
STACE AUDICES		
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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i).	ation	

al <u>annual rep</u>ort is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an ever or trustee ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in a chiment with an address, with all other like empowered. indicated on this annual report or supplemental officer or director of the corporation or the Block 12 or Block 13 if changed of or an an

SIGNATURE

Daytime Phone #