FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT 2000

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
00 MAY 10 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000084801

1. Corporation Name

ABL ENTERPRISES II, INC.

Principal Place of Business	Mailing Address
2729 WEST 1ST AVENUE HIALEAH, FL 33010	2729 WEST 1 ST AVENUE HIALEAH FL 33010

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: OCTOBER 02, 1998

2. Principal Place of Business
21 435-445 EAST 9TH ST
Suite, Apt. #, etc. 22
City & State 23 HIALEAH, FL
Zip 24 33013 Country 25 USA

2a. Mailing Address
26 435-445 EAST 9TH ST
Suite, Apt. #, etc. 27
City & State 28 HIALEAH, FL
Zip 29 33013 Country 30 USA

4. FEI Number: 65-0866866 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SANTIAGO DIEZ, P.A.
1401 BRICKELL AVENUE, SUITE 500
MIAMI, FL 33131

10. Name and Address of New Registered Agent

81 Name: HERNAN HERNANDEZ PACHECO
82 Street Address (P.O. Box Number is Not Acceptable): 435-445 EAST 9TH STREET
83
84 City: HIALEAH FL 85 Zip Code: 33013

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 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 appointment as registered agent and am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] 05/03/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD AMILCAR AREVALO 2729 WEST 1ST AVENUE HIALEAH, FL 33010	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD HERNAN HERNANDEZ PACHECO 435-445 EAST 9TH STREET HIALEAH, FL 33013	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BELKYS AREVALO 2729 WEST 1ST AVENUE HIALEAH, FL 33010	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	TD MARIA IRMA HERNANDEZ 435-445 EAST 9TH STREET HIALEAH, FL 33013	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	SD BETSABE HERNANDEZ 435-445 EAST 9TH STREET HIALEAH, FL 33013	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	800003282088 0 -06/09/00--01008--020 ****150.00 ****150.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	SP	☐ Change ☐ Addition

CR2E034 (11/98)

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 10 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] PRESIDENT 8-3-99 305-8843999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

STF FL32381F.1

[signature] " 05/03/00 "

To whom it may concern:

The reason for this letter is to ask you to please accept my pay of $150.00. I have not received a renewal form by mail nor I had knowledge of the UBR annual fee. I purchased ABL Enterprises II, Inc. nine months ago and I did not have knowledge of the Florida Department of State Division of Corporations.

Thank you,