**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

**DIVISION OF CORPORATIONS** 

## FILED Apr 25, 1999 8:00 am Secretary of State **Katherine Harris** Secretary of State 04-25-1999 90049 017 \*\*\*158.75

DOCUI 1. Corporation	MENT # P98000	085998	<u></u>		عاشا			
GARCIA BROTHERS INC.							SIR! 1811 (SE)	
Principal Place of Business Mailing Address					1 (198)(194) ILA IBIRI (1911) ABIII ABIII ABIII ABIII	it imimi milla katia i	4181 <u>1811 1881</u>	
3000 N.W. 88TH STREET 3000 N.W. 88TH STREET								
MIAMI FL 33147 MIAMI FL 33147					DO NOT WRITE IN THI	e edace		
	•	•			3. Date Incorporated or Qualifed	335700		1
, at					·			ĺ
	· · · · · · · · · · · · · · · · · · ·	2a. Mailing Address		10/07/1998 4. FEI Number	Anr	lied For		
			33		65-0867165		Applicable	İ
Suite, Apt.	# etc	Suite Apt # etc	Suite, Apt. #, etc.			\$8.75 A		İ
22		<u> </u>	27		5. Certifcate of Status Desired	Fee Req		İ
City & State		City & State		6. Election Campaign Financing	\$5.00 N	Mav Be	{	
23		28		Trust Fund Contribution Added to Fees				
Zip	Country	Zip Country		8. This corporation owes the current year Intangible				
24	25		10		Personal Property Tax.			
	9. Name and Address of Curren	t Registered Agent		<del></del>	10. Name and Address of New Registered	i Agent		Į
			81	81 Name				
GARCIA, HENRY F			82	Street Add	ress (P.O. Box Number is Not Acceptable)			1
	N.W. 88TH STREET		جيد احدمت					₽
MIM	AI FL 33147		83					
			. 84 City		F	85 Zip C	ode	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	s, the abov	e-named corp	poration submits this statement for the purpose of	of changing its r	registered	1
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auf	honzed by	the corporati	ion's board of directors. I hereby accept the app	ointment as reg	jistered	ļ
SIGNATURE	<u> </u>				and when reinstating) DATE			ļ
42	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: F ID DIRECTORS			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12	1 3
12.	DP :	DELETE	1.1 TITLE		Nobilional Communication Communication	☐ Change	Addition	1 ;
NAME	GARCIA, HENRY F	<del></del>	1.2 NAME			7		} :
STREET ADDRESS	3000 N.W. 88TH STREET		1.3 STREET ADDRESS			·		1
CITY-ST-ZIP	MIAMI FL 33147		1.4 CITY-S	ST-ZIP				] }
TITLE	DS	☐ DELETE	2.1 TITLE			Change	Addition	1
NAME	GARCIA, WILLIAM A		2.2 NAME					1
STREET ADDRESS	3000 N.W. 88TH STREET		2.3 STREE	TADDRESS				
CITY-ST-ZIP	MIAMI FL 33147		2.4 CITY-	ST-ZIP				
TITLE	,	☐ DELETE	3.1 TITLE			· ☐ Change	☐ Addition	
NAME			3.2 NAME					
STREET ADDRESS	•		3.3 STREE	T ADDRESS		-		1
CITY-ST-ZIP			3.4: CITY:	ST-ZIP				<b>√</b>
TITLE		☐ DELETE	4.1 TITLE			Change	Addition	1
NAME		•	4. 2 NAME					1
STREET ADDRESS			4.3 STREET ADDRESS					1
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP		Chagge	☐ Addition	ł
TITLE	•	☐ DELETE	5.1 TITLE			Change	☐ Addition	1
NAME	. •		5.2 NAME 5.3 STREET ADDRESS					1
STREET ADDRESS	,					•		1
CITY-ST-ZIP		☐ DELETE	5.4 CITY-5	DI-ZIP		Change	Addition	1
TITLE		☐ DETE IR	6.2 NAME			L_J Change	L., riganion	{
NAME		6.3 STREET ADDRESS						
STREET ADDRESS			6.4 CITY-ST-ZIP					
CITY-ST-ZIP	l		0.4 CH 1 - S	31-ZIF				١

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.

**SIGNATURE:**