PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000086724 \(\)

REPRESENTACIONES RAPLE, INC.

FILED Jul 22, 1999 8:00 am Secretary of State

07-22-1999 90008 030 ***150.00

Principal Plac	e of Business		Mailing Address						, ri 04 111 021 11 0 1			•		
5455 NW 72 AVE				5455 NW 72 AVE										
MIAMI FL 33166				MIAMI FL 33166					DO NOT WRITE IN THIS SPACE					
									3. Date Incorporated or		MIS SPACE			
									10/09/1998	Qualmed			ì	
2 Principal P	Place of Busine		2a. Mailing Address					4. FEI Number			Applied	For		
21			ļ.	26 10610 WASHINGTON					65-086	8707		Not App		
Suite, Apt. #, etc.				Suite, Apt. #, etc.					- \$8-75-Additional					
22				27 ST HP+# 104					5. Certificate of Status Desired Fee Required					
City & State				City & State					6. Election Campaign Financing \$5.00 May Be					
23			[28 YEMBROOK TINES				25						
Zip		Country		Zìp		Co	untry		8. This corporation owe	s the current yea	r			
24	2	5		29 3	<u> 3025</u>	30	51 <u>L</u>		Intangible Personal F	roperty.	Yes	X No		
	9. Name a	nd Address	of Current Re	gistere	d Agent		ļ.,		10. Name and Address	of New Registe	red Agent			
CIDA	NIAG IGO						81 Name						Į.	
GIRARDI, RAUL								82 Street Address (P.O. Box Number is Not Acceptable)						
5455 NW 72 AVE														
MIAMI FL 33166							83							
							84 City		<u>,,,,</u>		85 2	ip Code		
											=L °° `	p oodo		
office or agent. I a SIGNATURE	registered age am familiar with	pt, or both, in h, and accept	the State of the obligation	lorida, S s of, sec	Such change wa ction 607.0505,	is authorize Florida Sta	ed by the corp- itutes.	oration	ation submits this statement n's board of directors. I her	eby accept the ap	pointment as	register	be	
42	Signature, typed or	```	gistered agent and CERS AND D			(NOTE: Regist	ered Agent signatu	re requir	ed when reinstating) ADDITIONS/CHANGE	DA1		TORSIN	112	
TITLE	D	- OPFI	CERS AND D	IRECTO		1.1 T	m F		ADDITIONS/CHANGE	3 TO OFFICERS	- TE-TA			
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	MIAMI FL 3						ITY-ST-ZIP	P	embrook	Pixes	33	02.		
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NAME					Dereie	2.2 N		Ì			L Chair	<i>у</i> е ш ,	-addition	
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NAME						6.2 N	AME :							
STREET ADDRESS	,						TREET ADDRESS							
CITY-ST-ZIP	}					1	ITY-ST-ZIP						Ì	
14. I hereby ce						r the exem	ption stated in		on 119.07(3)(i), Florida Stat				,	
an officer o	on this annual i or director of th 2 or Block 13 if	ne corporation	or the receive	er or trus	stee empowered	curate and d to execut	that my signa e this report a	iture s s requ	hall have the same legal e lired by Chapter 607, Florid	tect as if made u la Statutes; and	inder oath; th that my name	at i am appears		

SIGNATURE: X Spanifica SCHEQUIRED

Representaciones Raple, Inc. 5455 NW 72nd Ave Miami Fl 33166

July 12, 1999

Florida Department of State

Tallahassee Fl

Ref: Annual Report 1999 Document # P98000086724

Sirs:

We are requesting decrees on penalties for filling late. We did not get the first report form and since the Co was incorporated during the month of October 1998, We did not think we had to file.

Thank you.

Raul Girar