**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000091494

## May 06, 1999 8:00 am Secretary of State

05-06-1999 90195 012 \*\*\*150.00

VENAME	ERICA BUSINESS OPPORTU	INITIES, INC.							
Principal Place	e of Business	Mailing Address				מין ניוסט ווושו אינוני שוו נשטונסטו ו		- 19191 1911 19181	ושטו ועות זונעו
1614 S.W. 1ST STREET 1614 S.W. 1ST STREET MIAMI FL 33135 MIAMI FL 33135						DO NOT WRI	TE IN THIS	SPACE	
						3. Date Incorporated or Qualifed			
						10/27/1998	·	· · · · · · · · · · · · · · · · · · ·	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	W_	<del></del>	plied For
21 Suite Apt	# oto	Suite, Apt. #, etc.				65-087750	9	\$8.75	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certifcate of Status Desired		Fee Re	
City & State City & State						6. Election Campaign Financing		\$5.00	May Be
23 28						Trust Fund Contribution		Added	
Zip Country Zip			Cour	itry		8. This corporation owes the curr	ent year In		
24	25   29   30   30   9. Name and Address of Current Registered Agent					Personal Property Tax.  10. Name and Address of New Registered Agent			□No
	9. Name and Address of Curren	t Registered Agent		81	Name	IU. Name and Address of New I	registered	Agent	
ROJAS, EDGAR J 1614 S.W. 1ST STREET									
				82 3	Street Addr	Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33135				83				<del></del>	
			}	84 (	City		<del></del>	85 Zip (	Code
					•		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 register 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.								registered gistered	
agent. I a	m familiar with, and accept the obliga-	tions of, Section 607.0505, Flori	da Statu	tes.			1/	6-	
SIGNATURE	ergal . not		61R	7.1	20135	C—PICE SIDEUT	413	0/77	\
12.	Signature, typed or printed name of registered ager OFFICERS AN	<del></del>	13.	Agent se	gnature require	ADDITIONS/CHANGES TO OF	FICERS AN	ND DIRECTO	DRS IN 12
TITLE	PD DELETE 11 TI			.E				☐ Change	Addition
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STREET ADDRESS	1011,5111111111111111111111111111111111		2.3 STF	2.3 STREET ADDRESS					}
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NAME			3.2 NAA						
STREET ADDRESS	•			3.3 STREET ADDRESS					
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NAME (				4. 2 NAME					
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TITLE	☐ DELETE 6.1		6.1 TITL	.E				Change	Addition
NAME			6.2 NAM	Æ					
STREET ADDRESS			6.3 STR	REETAD	DRESS				
CITY-ST-ZIP			6.4 CIT	Y-ST-ZI	IP				J

14. Thereby 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 chapted, or on an attachment with an address, with all other like empowered.

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR