ANNU	PROFIT RPORATION JAL REPORT <b>1999</b>		MAY 1ST IS \$550.00 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED Feb 27, 1999 8:00 am Secretary of State 02-27-1999 90020 017 ***150.00		1
r. corporation	MENT # <b>P9</b>		741				
DOWNE							
Principal Place			ing Address				
254 Southwes Miami FL 3313	ST 8TH STREET 0		Southwest 8th stre II Fl 33130	El		IIS SPACE	
			•		3. Date Incorporated or Qualifed		
2. Principal P	lace of Business	2a. M	Mailing Address		4. FEI Number	Applied For	
1		26			65-0873625	Not Applicab	le
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.		5. Certifcate of Status Desired	Fee Required	
City & Stat	.e		City & State		6. Election Campaign Financing	\$5.00 May Be	
3	Country	28	Zip	Country	Trust Fund Contribution	Added to Fees	_
Zip 4	Country	29	· ·	30	8. This corporation owes the current year Personal Property Tax.	Yes XNo	
	9. Name and Addres	ss of Current Registe	red Agent	81 Name	10. Name and Address of New Registere	ed Agent	
AME	RILAWYER ->				ARELYS LOPEZ		
	ALMERIA AVENUE-			82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
COR	IAL GABLES FL 33134	F		83	254 SW 8# 5	STAFET	
				84 City		85 Zip Code	
14 Dursuant	to the provisions of Section	ons 607 0502 and 607	1508 Elorida Statute	s, the above-named co	poration submits this statement for the purpose	of changing its registered	
11. Pursuant office or re agent. La	to the provisions of Secti egistered agent, or both, m familiar with, and acce	ons 607.0502 and 607 In the State Of Florida. In the obligations of S	1508, Florida Statute Such change was au Section 607.0505, Flori	s, the above-named cou thorized by the corpora ida Statutes.	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	of changing its registered	
office or n agent. 1 a SIGNATURE	egistered agent, or both, m familiar with, and acce	p the State of Florida. p the obligations of, S	. Such change was au Section 607.0505, Flori	ida Statutes.		of changing its registered	
office or n agent. 1 a SIGNATURE	egistered agent, or both, m familiar with, and acce Signature, typed of writed name	p the State of Florida. p the obligations of, S	. Such change was au Section 607.0505, Flori	s, the above-named con thorized by the corpora da Statutes. Registered Agent signature requi			
office or n agent. 1 a SIGNATURE	egistered agent, or both, m familiar with, and acce Signature, typed of printed name OF PTD	In the State of Florida. of the obligations of, S of registered agent and the it a FIGERS AND DIREC	. Such change was au Section 607.0505, Flori	Ithonzed by the corpora ida Statutes. Registered Agent signature requi	red when reinstating) DATE		ion
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