OND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. MOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED Sep 14, 1999 8:00 am Secretary of State

09-14-1999 90003 046 ***150.00

1999 P98000093774

zorporation Name	
A MILLA DORADA	INCORPORATED

cipal Place of Business						
B1 N.E. 38TH AVE. #414						
WIAMI BEACH FL 33180						

cipal Plac	e of Business	Mailing Address						
	TH AVE. #414	20381 N.E. 38TH AVE						
MAMI BEA	CH FL 33180	N. MIAMI BEACH FL	33180			DO NOT W	RITE IN THI	S SPACE
						3. Date Incorporated or Qualifi		3 OI NOL
						11/05/1998		
ringinal D	lace of Business	2a. Mailing Address				4 FEI Number		Applied For
mincipal e	lace of business	26				65-089 138	7	Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.						\$8.75 Additional
ouite, Apt.	<i>a</i> , 510.	27				5. Certificate of Status Desired	L_J	Fee Required
ity & Stat		City & State				6. Election Campaign Financin		\$5.00 May Be
,,	_	28				Trust Fund Contribution		Added to Fees
ip.	Country	Zip	Cou	ntry		8. This corporation owes the co	irrent year	
	25	29	30			Intangible Personal Property	- 1	Yes No
	9. Name and Address of Current		15.54			10. Name and Address of Nev	Registered	Agent
"				81 N	ame			
	C ACCOUTING SERVICES, INC.	•		82 S	Ann na Andre	ess (P.O. Box Number is Not Acce	atable)	
235	5 W. 52TH STREET			02 5	treet Addir	ess (F.O. Box Number is Not Acce	naule)	
HIA	LEAH FL 33016			83				
								as Zi- Codo
				84 C	ity		FI	85 Zip Code
Dureugni	to the provisions of sections 607.0502	and 607.1508. Florida Sta	atutes, the abo	ove-nar	ned corpor	ration submits this statement for the	purpose of c	hanging its registered
office or	registered agent, or both, in the State.	of Florida. Such change v	as authorized	o dv the	corporation	on's board of directors. I hereby acc	ept the appo	ointment as registered
agent. I a	am familiar with, and accept the obliga	itions of, section 607.0000	, Fiorida Stat	ules,				
NATURE	Signature, typed or printed name of registered agen	1 and title if applicable.	(NOTE: Register	red Agent	signature requ	ired when reinstating)	DATE	
	OFFICERS AN		13.			ADDITIONS/CHANGES TO C	FFICERS A	ND DIRECTORS IN 12
	PD	DELETE	1.1 TIT	LE				Change Addition
	TARAMAN, HECTOR I	<u> </u>	1.2 NA	ME				
T ADDRESS	20381 N.E. 38TH AVE. #414		1,3 ST	REET ADD	RESS			
ST-ZIP	N. MIAMI BEACH FL 33180		1.4 CF	TY-ST-ZIP				
	VPD	DELETE	2.1 TIT	rle				Change Addition
:	TARAMAN, ERNESTO A		2.2 NA	ME				-
T ADDRESS	20381 N.E. 38TH AVE. #414		2.3 ST	REET ADD	RESS			
ST-ZIP	N. MIAMI BEACH FL 33180		2.4 Cf	TY-ST-ZIP				
51-2.IF	TD .	DELETE						Change Addition
	TARAMAN, ENRIQUE H		3.2 NA	ME				_ • -
T ADDRESS	20381 N.E. 38TH AVE. #414		3.3 ST	REET ADD	RESS			
ST-ZIP	N. MIAMI BEACH FL-33180			TY-ST-ZIP		-		
)1-2IF	11. 148 8111 025 107 1 2 00 100	DELETE	4.4.		5			Change X Addition
			4.2 NA	ME	6	USTQUO ASMAN 1381 N.E. 38TH VENTURA FC 3	#	4
T ADDRESS			4.3 ST	REET ADC	RESS 2	0381 N.E. 38 TH	ave #	414
			4.4 CI	TY-ST-ZIP	18	venvono FC 3	3180	
ST-ZIP		DELETE	5.1 TIV	TLE				Change Addition
			- 6					
T ADDRESS			5.2 NA	ME.				
- AUURE00					RESS			
2T 710			5.3 ST	REET ADD	1			
ST-ZIP		חפו בדנ	5.3 ST	REET ADD	1			Change Addition
ST-ZIP		DELETE	5.3 ST	REET ADD TY-ST-ZIP TLE	1			Change Addition
ST-ZIP		DELETE	5.3 STI 5.4 CI ¹ 6.1 TIT 6.2 NA	REET ADD TY-ST-ZIP TLE				Change Addition

IGNATURE: X

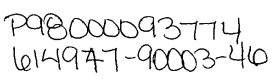
I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have 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 charged, or on an attachment with an address.

9-10-99

933-0533

La Milla Dorada, Incorp.

20381 N.E. 30th avenue #414 Aventura ,Fl 33180



SEPT 10,1999

Department of revenue

Division of corporation

Ref: La Milla Dorada ,Incorporate

Dear Sir or Madam

I just receive the second notice of the annual report 1999, but I want to let you know, that I never received the first notice

Enclose please find the paid check # 1081 in the amount of \$150 for the fees 1999

If you have any question please call me at (305) 933-0533

Sincerely

Gustavo Asman

Director