PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000099346

FILED Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90110 040 ***150.00

	ORP.				
Principal Place of Business TS 4 N. W. WORTH RIVEN DRIVE 3891 NW. SOUTH RIVER BHIVE MIAMI FL 33142	Mailing Address No AT 30th NW. COUTH RIVER DAY		I this is the same and any mark mark and and any) 1911 5 191 5 9 11 114 9 121 14 2411 (14 21	
MINMI FE 33742	MINIMI IL SOTTE			DO NOT WRITE IN THIS SPACE	
			3. Date incorporated or Qualifed	1	
			11/30/1998	- VAE	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21	26		65-0889056	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
	City & State		8. Flassing Compolen Flaggeing	\$5.00 May Be	
City & State	<u> </u>		6. Election Campaign Financing Trust Fund Contribution	Added to Fees	
Zip Country	Zip	Country	8. This corporation owes the current year		
24 25		30	Personal Property Tax.	Yes DNo	
9. Name and Address of Curr		30 	10. Name and Address of New Registers	d Agent	
	<u> </u>	81 Name			
VILA MASOT, OSCAR	# ON	So Mea Shoulde	ress (P.O. Box Number is Not Acceptable)	,	
-8001-N.W. SOUTH RIVER DRIVE	2754 N.W NORTH RIV	CO Sueer Addi	1000 ti .O. DUA HUMBO IS NOT PACOPICOTO		
MIAMI FL 33142	MiAmi FL 3314	83			
		84 City		. 85 Zip Code	
		1 1 7 7	<u> </u>	L	
11. Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Sta	ta of Florida, Such change was au	inanzed ov line cordoralk	poration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its registered pointment as registered	
agent. I am familiar with, and accept the obli	gations of, Section 607.0505, Flori	da Statutes.	• • • • • • • • • • • • • • • • • • • •		
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port is true and accurate and trial my signature shall have the same legal effect as if made under eath; that I am ar tee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in I an address, with all other like empowered. indicated on this annual report or supplemental annual re officer or director of the corporation or the receiver or trus Block 12 or Block 13 if changed, or on an attachment with

SIGNATURE: _