## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P98000100253**1. Corporation Name

CORTEZ ENTERPRISES, INC.

## **FILED** Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90081 001 \*\*\*158.75



Principal Place	of Business	Mailing Address			r rossende isa imela ranti kativi datiti adilah telati datiti datiti besila telati dilah sili idali			
9931 S.W. 145TH STREET Miami Fl 33176		9931 S.W. 145TH STREET						
		MIAMI FL 33176			DO NOT WR	ITE IN THIS	SPACE	
					3. Date Incorporated or Qualifec		OI TIOL	
					12/02/1998			
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		777	Applied For
21 2047	15 Biscayne Blud	26 20475 Bisc	OWNE	Blu	65-087868	0	— <del>                                    </del>	lot Applicable
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.	<del></del> _				\$8.75	Additional
22 # 4	G-11	27 # 6 - 11			5. Certifcate of Status Desired	×	Fee f	Required
City & State	_	City & State			6. Election Campaign Financing		\$5.00	May Be
23 Aven	tura FL	28 Aventura	FL		Trust Fund Contribution		Added	to Fees
الا کان ا	Country		Country		8. This corporation owes the cur	rent year Int		•
24 37	180 25 DADE	29 33180 30	<u>\b/</u>	DE.	Personal Property Tax.		Yes	_ <b>Æ</b> No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New	Registered	Agent	
СОРТ	T EEDMANDO		81	Name		~`		
Cortez, Fernando 9931 S.W. 145th Street				Street	Address (P.O. Box Number is Not Accept	able)		<del></del>
	FL 33176							
MINAMI	11 331/0		83					
			84	City	<del></del>		85 Zip	Code
						<u> </u>		
office or re	gistered agent, or both, in the State		rized by	the corp	corporation submits this statement for the oration's board of directors. I hereby acce			
SIGNATURE 5	Ignature, typed or printed name of registered ag	ent and title if applicable. (NOTE: Regis	stered Agen	signature i	equired when reinstating)	DATE		<del>-</del>
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECT	ORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE				Change	Addition
NAME (	CORTEZ, FERNANDO	T.	1.2 NAME					
1	931 S.W. 145TH STREET	1.	1.3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33176	<u> </u>	1.4 CITY-\$1	ZIP				
TITLE		☐ DELETE	2.1 TITLE		S		Change	Addition
NAME		į.	22 NAME		CORTEZ, ANA			
STREET ADDRESS		l :	2.3 STREET	ADDRESS	9931 SW 145TH STRE	EET		
CITY-ST-ZIP		<b>.</b>	2. 4 CITY- S	T-ZIP	M/AMI FL 33176			
TITLE		☐ DELETE :	3.1 TITLE				Change	Addition
NAME		] ;	3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS'				<del></del>
CITY-ST-ZIP			3.4. CITY-S	r-ZIP				
TITLE		☐ DELETE 4	4.1 TITLE				Change	Addition
NAME		] .	4. 2 NAME					
STREET ADDRESS		į a	.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST	-ZIP				
TITLE	<del></del>		5.1 TITLE				Change	Addition
NAME			5.2 NAME	j				
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST	- ZIP				
TITLE	<del></del>	☐ DELETE €	S.1 TITLE		<del></del>	<del>-</del>	Change	Addition
NAME			5.2 NAME					_
STREET ADDRESS		<b>i</b> e	3.3 STREET	ADDRESS				
CITY-ST-ZIP			34 CITY-ST					
CIT ST-ZIP								

14. 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 or suppliemental 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 changes, or an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Fernando Contez