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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** May 08, 1999 8:00 am Secretary of State 05-08-1999 90010 003 ***150.00

FILED

1999

DOCUMENT # P98000102997 1. Corporation Name

CITIUX CORPORATION

Principal	Place	of	Busine	SS

N.W. 8TH ST

Mailing Address

8920 N.W. 8TH ST



		MIAMI FL 33172			DO NOT WRIT	E IN I HIS	SPACE	
					3. Date Incorporated or Qualifed			
	•				12/10/1998			
	ace of Business	2a. Mailing Address		L	4. FEI Number	70	A	pplied For
1512	5 N.W.112 Cour	25 5125 NW	112 Col	<i>)11</i> .	65-08805	701	N	ot Applicable
Suite, Apt. #		Suite, Apt. #, etc.	•		5. Certifcate of Status Desired			Additional
<u> </u>		27			5. Certificate of Otatus Desired		Fee R	equired
City & State		City & State	1		6. Election Campaign Financing		\$5.00	May Be
M	iami, FL	[28] MIAM,	PC		Trust Fund Contribution		Added	to Fees
Zip	Country		Country		8. This corporation owes the curre	ent year Int		V .
331	18 25 USA	29 33 70 3	<u>J</u> SA		Personal Property Tax.		∐Yes	Xi _{No}
	9. Name and Address of Current	Registered Agent	101		10. Name and Address of New R	egistered	Agent	
DADOL	ETO WALTED I		81 Name	•	\ / ^			
	ETO, WALTER J		82 Stree	t Addres	P.O. Box Number is Not Accepta	ble)		
	N.W. 8TH ST							
#219	T I		83	- 1	$I \supset I / I$			
MAMI	FL 33172		84 City		<u>'</u>		85 Zip	Code
			O4 City			FL	. 63 24	0000
1. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above-name	d corpor	ation submits this statement for the	purpose of	changing its	registered
office or re	egistered agent, or both, in the State of in familiar with, and accept the obligati	f Florida. Such change was auth	norized by the con	poration'	's board of directors. I hereby accep	t the appoi	ntment as re	egistered
	A landacept the obligati	ons or, decitor our loods, riona	a ciaidics.	10	^	\sim	1/A.	
IGNATURE :	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	agistered Agent signature	required w	Vhen reinstating)	DATE	/	
2.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	FICERS AN	ID DIRECTO	ORS IN 12
TLE	PD	☐ DELETE	1.1 TITLE	PI	~		V-/01	☐ Addition
						- 12 -		
AME !	BARRETO, WALTER J		1.2 NAME	BA	RRETO, WALLE	$-\kappa_{L}O$	•	
	BARRETO, WALTER J 8920 N.W. 8TH ST		1	BA	IRRETO, WALTE	irt.	•	
TREET ADDRESS	8920 N.W. 8TH ST		1.3 STREET ADDRES	BA	ARRETO, WALTE 25 NW 112 COU LIAMIL EL 331	78	•	
TREET ADDRESS	8920 N.W. 8TH ST MIAMI FL 33172	☐ DELETE	1	BA	ARRETO, WALLE 25 NW 112 COU Liami, FL 331	78	Change	Addition
TREET ADDRESS (ITY-ST-ZIP TILE	8920 n.w. 8th St Miami FL 33172 VD	☐ DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	BA	ARRETO, WALLE 25 NW 112 COU liami, FL 331	78		Addition
TREET ADDRESS (ITY-ST-ZIP ITLE ITLE ITLE ITLE ITLE ITLE ITLE ITLE	8920 N.W. 8TH ST MIAMI FL 33172 VD LIMA, MILKO	☐ DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	101	IRRETO, WALLE 25 NW 112 COU liami, FL 331	78 178		Addition
TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS	8920 N.W. 8TH ST MIAMI FL 33172 VD LIMA, MILKO 2 CIRCLE DR. #REAR	☐ DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	101	IRRETO, WALLE 25 NW 112 COU Liami, FL 331	78		☐ Addition
TREET ADDRESS ITY-ST-ZIP ITLE IAME ITREET ADDRESS ITY-ST-ZIP	8920 N.W. 8TH ST MIAMI FL 33172 VD LIMA, MILKO		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	101	IRRETO, WALLE 25 NW 112 COU Liami, FL 331	78	☐ Change	·
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TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME	8920 N.W. 8TH ST MIAMI FL 33172 VD LIMA, MILKO 2 CIRCLE DR. #REAR		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	s	IRRETO, WALLE 25 NW 112 COU liami, FL 331	78	☐ Change	
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