PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000103141

1. Corporation Name

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90119 048 ***150.00

(KARJAV,	ING.										
Principal Plac	Mailing Address	Address				I BEDIADA IIO IDIOI SUID OENA DDIA DDIA			901 (10) (08)	ļ	
1539 N.W. 119TH ST. 1539 N.W. 119TH											!
MIAMI FL 33167 MIAMI FL 33167							DO NOT WRITE	IN THIC (SDACE		
,						-	3. Date Incorporated or Qualifed	IN THIS	3FACE		ı
,						- 1	12/07/1998				(i
2. Principal Place of Business 2a. Mailing Address							4. FEI Number		Api	plied For	
21		26	26				65-0891758		No	t Applicable	
Suite, Apt. #, etc Suite, Apt. #, etc.				- *			5. Certificate of Status Desired	n /-	~\$8 <u>:</u> 75_∧		1
22		27							Fee Re		ł
City & Stat	t e	City & State					6. Election Campaign Financing	3	\$5.00 Added to		
Zip	Country	7in	Zip Country				Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible				
24	25	29	30	y		1	Personal Property Tax.	year into		□No	
24]	9. Name and Address of Curre						10. Name and Address of New Reg	istered A	gent		
				81	Name						ŀ
OTERO, OSCAR L				82	Street A	Address	(P.O. Box Number is Not Acceptable	<u></u>			
1	N.W. 119TH ST.										ļ
i Miam	II FL 33167			83							ļ
}				84	City				85 Zip C	Code	1
								<u>FL</u>	<u> </u>		}
l office or i	to the provisions of Sections 607,05 registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change w	as authorize	o bv	the corpor	ration's	tion submits this statement for the pur board of directors. I hereby accept the	ne appoin	tment as rec	gistered	
SIGNATURE	Signature, typed or printed name of registered ag	jent and title if applicable. (NOTE: Registere	d Agen	nt signature rec	quired wh	-	DATE] 🧟
12.	OFFICERS A	ND DIRECTORS	13.				ADDITIONS/CHANGES TO OFFIC	ERS AN			ğ
TITLE	D	☐ DELETE			1.1 TITLE				☐ Change	☐ Addition	1
NAME	OTERO, OSCAR L			1,2 NAME							1037
STREET ADDRESS	1			1,3 STREET ADDRESS							ļ
CITY-ST-ZIP	MIAMI FL 33167			1,4 CITY-ST-ZIP					Change	Addition	6
TITLE	D			2.1 TITLE			*_ · · · · · · · · · · · · · · · · · · ·	ـ مبد	C Charige	- Addition	l -
NAME	HERNANDEZ, JESUS A			2.2 NAME							Ì
1	1539 N.W. 119TH ST.			2.3 STREET ADDRESS 2.4 CITY-ST-ZIP							
TITLE -	MIAMI FL 33167			3.1 TITLE					Change	Addition	1
NAME	1			3.2 NAME							
STREET ADDRESS	ess		I -	3,3 STREET ADDRESS							[
CITY-ST-ZIP				CITY-S						_	
TITLE		☐ DELET							☐ Change	☐ Addition	ļ
NAME	·		4. 2	VAME							
STREET ADDRESS			4,3 \$	4.3 STREET ADDRESS							
CITY-ST-ZIP			4.40	4.4 CITY-ST-ZIP					<u> </u>		1
TITLE	-		TITLE					☐ Change	Company Company		
NAME				IAME							
STREET ADDRESS			I '		TADORESS						ł
CITY-ST-ZIP				ITY-S	T-ZIP				Change	☐ Addition	1
TITLE		☐ DELET	-	IAME					☐ Change	☐ Addidon	
NAME					TADORESS						
STREET ADDRESS	1					44					
CITY-ST-ZIP	1		0.41	TY-S	1-4F	77					נ

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 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 is sequinal by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.