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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000105303

1. Corporation Name

FRANK & RUDY CORP.

Principal Place of Business

Mailing Address

6565 COLLINS AVENUE
MIAMI BEACH FL 33141

6565 COLLINS AVENUE
MIAMI BEACH FL 33141

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

PORTOBANCO, FRANCISCO H
8312 N.W. 7TH ST
#57
MIAMI FL 33126

81 Name

JOSE R CUADRA

82

Street Address (P.O. Box Number is Not Acceptable)

244 NE 89 ST.

83

84 City

Miami

FL

85 Zip Code

33138

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Jose R Cuadra
Signature typed or printed name of registered agent and fee payable.

(NOTE: Registered Agent signature required when re-stating)

1/30/99
DATE

12. OFFICERS AND DIRECTORS

TITLE

PD
PORTOBANCO, FRANCISCO H

NAME

STREET ADDRESS

8312 N.W. 7TH ST #57

CITY-ST-ZIP

MIAMI FL 33126

TITLE

VD

NAME

CUADRA JOSE R CUADRA

STREET ADDRESS

244 NE. 89TH ST.

CITY-ST-ZIP

MIAMI FL 33138

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

PD
JOSE R. CUADRA
244 NE 89 ST
MIAMI, FL 33138

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***150.00 ***150.00

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 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 changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Jose R Cuadra
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/99

(305) 8650012
Telephone Number

0008340

CR2E034 (11/98)