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

1999

DOCUMENT # DOCOO

 Corporatio 	ONGA SOCIAL CLUB, INC.	103000		l			
Principal Plac	e of Business	Mailing Address				ii Baidi Biiaf ibiia b	{
1317 SILVERADO 1317 SILVERADO NORTH LAUDERDALE FL 33068 NORTH LAUDERDALE			68		DO NOT WRITE IN TI	HIS SDACE -	
					3. Date Incorporated or Qualifed 12/22/1998	TIO OF ACE	
2. Principal P	Place of Business	2a. Mailing Address		-	4. FEI Number		plied For
21		26			65-0884710		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	
22		27				Fee Re	
	to: -=- <u>-</u>	City & State			6. Election Campaign Financing	*5:00	-
23	Country	28	Count	'D'	Trust Fund Contribution	Added to	11662
Zip	Country 25		30	u y	This corporation owes the current year Personal Property Tax.	Tintangible ☐ Yes	No
24	9. Name and Address of Currer		30 ₁		10. Name and Address of New Register		
	o. Hallo dita Madioa at a contra		8	1 Name			
RIVILLAS, LEONEL			<u> </u>	10 01-14	(D.O. Day Number in Not Assessable)		
1317 SILVERADO			٥	Street Add	dress (P.O. Box Number is Not Acceptable)		
NORTH LAUDERDALE FL 33068				13	•		
			_	14 05		05 7/n (
				14 City	F	85 Zip C	- ode
office or i	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was aut tions of, Section 607.0505, Florid	thonzed t da Statuti	by the corporates.	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	ppointment as re	gistered
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	PVST	☐ DELETE	1.1 77714	Ε	•	Change	Addition
NAME	RIVILLAS, LEONEL		1.2 NAM	E ·			
STREET ADDRESS	1317 SILVERADO		1,3 STRE	EET ADDRESS			ļ
CITY-ST-ZIP	NORTH LAUDERDALE FL 33068 1.40		1.4 CITY	-ST-ZIP			_
TITLE	D DELETE 21			E		☐ Change	☐ Addition
NAME	RIVILLAS, LEONEL		2.2 NAM	E			ļ
STREET ADDRESS	1317 SILVERADO		2.3 STRE	EET ADDRESS			
CITY-ST-ZIP	NORTH LAUDERDALE FL 33068		2. 4 CITY	(-ST-ZIP			
TITLE	, e	DELETE -	3.1 ππ.E	E		☐ Change	☐ Addition
NAME			3.2 NAM	E			
STREET ADDRESS			3.3 STRI	EET ADORESS]
CITY-ST-ZIP		_	3.4. CITY	/-ST-ZIP			٠,
TITLE		☐ DELETE	4.1 TITL	E		☐ Change	Addition
NAME			4. 2 NAM	AE			ļ
STREET ADDRESS			4.3 STRE	EET ADDRESS			
CITY-ST-ZIP			4.4 CITY	-ST-ZIP			
TITLE		☐ DELETE	5,1 TITLE	E .		☐ Change	☐ Addition
NAME	ł		5.2 NAM	E			
STREET ADDRESS			5.3 STRE	EET AODRESS			
CITY-ST-ZIP	<u> </u>		5.4 CITY				
TITLE	1	□ DELETE	6.1 TITLE			☐ Change	☐ Addition

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.

6.2 NAME

6.3 STREET ADDRESS

REQUIRED SIGNATURE:

NAME

STREET ADDRESS

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90010 018 ***150.00