

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

FILED

99 JAN -7 AM 11:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S12936 (8)

1. Corporation Name

PADRON ENTERPRISES, INC.

Principal Place of Business

7620 S.W. 95TH ST.  
MIAMI FL 33156

Mailing Address

7620 S.W. 95TH ST.  
MIAMI FL 33156

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/05/1990

4. FEI Number

65-0224986

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 8131 SW 92 AVE.

Suite, Apt. #, etc.

22

City & State

23 MIAMI, FL.

Zip

24 33173

Country

25 USA

2a. Mailing Address

26 8131 SW 92 AVE.

Suite, Apt. #, etc.

27

City & State

28 MIAMI, FL.

Zip

29 33173

Country

30 USA

9. Name and Address of Current Registered Agent

GONZALEZ, LUCY  
7820 SW 95 STREET  
MIAMI FL 33156

10. Name and Address of New Registered Agent

81 Name

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

8131 SW 92 AVE.

83

84 City

MIAMI

FL

85 Zip Code

33173

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-7-97

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME GONZALEZ, LUCY  
STREET ADDRESS 7820 S.W. 95TH ST.  
CITY-ST-ZIP MIAMI FL

TITLE VS ☐ DELETE

NAME PADRON, ADRIANO  
STREET ADDRESS 7820 SW 95 ST.  
CITY-ST-ZIP MIAMI FL 33156

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

8131 SW 92 AVE.  
MIAMI, FL 33173

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

8131 SW 92 AVE.  
MIAMI, FL. 33173

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

500002743325-4  
-01/15/99-01019-014  
\*\*\*\*150.00 \*\*\*\*150.00

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-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 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.

SIGNATURE:

Signature and typed or printed name of signing officer or director

Date

Signature

0210230

4-7-97 (305)595-9792

②

**Padron Enterprises, Inc.**

Office (305) 595-9793 Pager (305) 364-5858 Fax (305) 273-6245

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To Whom It May Concern:

12/11/98

I mailed my payment for \$ 150.00 on 4/7/97 for filling the corporation. My company has been filing for the last eight years on time. This check must of got lost in the mail or at one of your offices. After speaking with Mrs. Trevor from your reinstatement office on 12/11/98, she tells me to send proof of payment and a check for \$ 150.00 and I will be reinstated immediately. I'm sorry for the confusion and this will not happen again. Since the check was lost I could not send the cancelled check. I am enclosing my Corp. application with changes and my check register stub.

Thank You,  
Mr. Adriano L. Padron