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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

S45210

(9)

PIECIES INC.

Mailing Address

FILED Apr 15 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address							
18710 N.W. 46TH AVE. 18710 N.W. 46TH AVE.									
MIAMI FL 3	065 MIAMI FL 33065				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified			
						04/15/1991			
2. Principal P	ace of Business	2a, Mailing Address		~		4. FEI Number	A	pplied For	
21 704	15SW 83P1	26 7045 SC	ω 8	33) PI	65-0263476	N	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional	
22		27				8. Cermicate of Status Desired	Fee R	equired	
City & State	-Miani Fl	City & State	1	/		6. Election Campaign Financing		May Be	
23		28 MIAMI	7-1			Trust Fund Contribution	Added Added	to Fees	
Zip 24 33/1	Country	10 20 143 H	Coun	itry		8. This corporation owes or has paid	r- ' -		
24 221	9. Name and Address of Current	29 32/43 3 Registered Agent	1 0			Personal Property Tax due June 3		No	
		mogratored Agoin		B1	Name	10, Hallo did Address of New Heg	istered Agent		
	EYVA, BELKYS								
					82 Street Address (P.O. Box Number is Not Acceptable)				
N.	NAMI FL 33055		-	33					
			ε	34	City		FL B5 Zip	Code	
11 Pursuant	to the provisions of Sections 607.0502	and 607 1508 Florida Statutes	the abo	200-7	named c	cornoration submits this statement for the nu	· · · · · · · · · · · · · · · · · · ·	its renistered	
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.									
$1 \qquad (ad + 0) \qquad (ad +$									
SIGNATURE	Signature, typed or product name of registered agent	More than if applicable (NOTE F	Registered a	Accel	signalure re	equired when reinstaling)	DATE		
12,	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	RS IN 12	
TITLE	D	DELETE	1.1 1ITL	.E		I CAJA BOLKUC	Change	Addition	
NAME	LEYVA, BELKYS		1.2 NAM	AE.		Leyen Delly 3			
STREET ADDRESS	18710 N.W. 46TH AVE.		1.3 STRI	EET AC	DDRESS	70455W B341		J	
CITY-ST-ZIP	MIAMI FL		1.4 CITY	/-S1-	ZIP	LEYVA BEKYS 7045SW B3P/ MIAMI F/ 33/	43	ļ	
TITLE	DELETE 2.17			E			Change	Addition	
NAME			2.2 NAM	AE	ļ				
STREET ADDRESS			2.3 STRE	EET AD	DRESS			Ì	
CITY-ST-ZIP			2. 4 CIT	Y-\$1-	ZIP				
TITLE		DELETE	3.1 TITL	E			☐ Change	Addition	
NAME			3.2 NAM	1E					
STREET ADORESS			3.3 STR	EET AD	DRESS			ļ	
CITY-ST-ZIP			3.4. CHY	Y-\$1-	ZIP				
TITLE		☐ DELETE	4.1 TITL	E			Change	☐ Addition	
NAME			4.2 NAM	ΜE					
STREET ADDRESS			4.3 STRE	EET AC	DRESS				
CITY-ST-ZIP			4.4 City		ZIP				
TITLE		☐ DELETE	5.1 TITE				Change	L Addition	
NAME			5.2 NAM	1E					
STREET ADDRESS			5.3 STRE	EET AD	DRESS				
CITY-ST-ZIP			5.4 CITY		ZIP				
TITLE		DELETE	6.1 TITLE	E	1		Change	☐ Addition	
NAME			6.2 NAM	1E					
STREET ADDRESS			6.3 STRE	EET AD	DRESS				
CITY-ST-ZIP			6.4 CITY	-ST-	<u>ZIP</u>				

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.

Bellie Leina

4-6-98