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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS FILED Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90012 005 \*\*\*150.00

## DOCUMENT # S50295

ANTIQUES & TRIBAL, INC.

			,	- <del>-</del>					
Principal Place	of Business	Mailing Address				, , , , , , , , , , , , , , , , , , , ,		, , grar! 10m	
7165 S.W. 47 S	TREET	7165 S.W. 47 STREET							
#319		#319 MIAMI EL 30155	#319 MIAMI FL 33155			DO NOT WRITE IN THIS SPACE			
MIAMI FL 33155 MIAMI FL 33155						3. Date Incorporated or Qualifed			}
						05/01/1991	· ·		
	ace of Business	2a. Mailing Address				4. FEI Number	<u> </u>	plied For	ł
21	<u> </u>	26			<del>_</del>	65-0263136		Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A		
City & State	<del></del>	City & State		***		6. Election Campaign Financing	\$5.00	May Be	
23	• _	28				Trust Fund Contribution	Added to		1
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Ini			) 1
24	25	29	30	_		Personal Property Tax.		∐No	Į
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	Agent		4
IEDE	EZ, RAFAEL		l	81  h	Name		•		1
	S TAMIAMI CANAL RD.			82 5	Street Addre	ess (P.O. Box Number is Not Acceptable)	1		
MIAN	/II FL 33126			83					1
<u> </u>				84 (	City		85 Zip C	ode	
				1 1	•	FL	<b>-</b>   1		
_11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statut	es, the at	bove-n	amed corpo	pration submits this statement for the purpose of n's board of directors. I hereby accept the appo	changing its introduction	registered distered	<u>-</u>
agent. I a	m familiar with, and accept the obligati	ions of, Section 607.0505, Flo	rida Statı	utes.	3 COI POI GIO	ing board of anothers, thereby accept and eppe			
SIGNATURE		····				when reinstating) DATE			١.
12.	Signature, typed or printed name of registered agent OFFICERS ANI		: Registered	Agent sig	gnature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTO	RS IN 12	άo
TITLE	PD .	DELETE	1,1 111	 П.Е			Change	Addition	7
NAME	JEREZ, GILDA	_	1.2 NA		1				3
STREET ADDRESS	6735 TAMIAMI CANAL ROAD		1.3 ST	REET AD	DRESS				
CITY-ST-ZIP	MIAMI FL								)   
TITLE					ip Ì		•		0.000
	SD	☐ DELETE		TY-ST-Z	IP .		Change	Addition	CDOEN
I NAME 1		☐ DELETE	1.4 CI	TY-ST-ZI ILE	IP		Change	Addition	CDOEN
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STREET ADDRESS	JEREZ, RAFAEL	☐ DELETE	2.1 TIT 2.2 NA 2.3 ST	TY-ST-ZI TLE AME	DDRESS		Change	Addition	CDOEO
	JEREZ, RAFAEL 6735 TAMIAMI CANAL ROAD	☐ DELETE	2.1 TIT 2.2 NA 2.3 ST	TY-ST-ZI TLE AME TREET AD ITY-ST-Z	DDRESS		☐ Change	Addition	CDOEN
STREET ADDRESS	JEREZ, RAFAEL 6735 TAMIAMI CANAL ROAD		2.4 CI 2.3 ST 2.4 CI	TY-ST-ZI TLE AME TREET AD ITY-ST-Z	DDRESS				CDOEN
STREET ADDRESS CITY-ST-ZIP TITLE	JEREZ, RAFAEL 6735 TAMIAMI CANAL ROAD		1.4 Cr 2.1 Tri 2.2 NA 2.3 ST 2.4 Cr 3.1 Tri 3.2 NA	TY-ST-ZI TLE AME TREET AD ITY-ST-Z	DORESS DP				CDOEN
STREET ADDRESS CITY-ST-ZIP TITLE NAME	JEREZ, RAFAEL 6735 TAMIAMI CANAL ROAD		1.4 CF 2.1 TH 2.2 NA 2.3 ST 2.4 CF 3.1 TH 3.2 NA 3.3 ST	TY-ST-ZI TLE AME TREET AD TTY-ST-Z TLE	DDRESS DDRESS			☐ Addition	) Case C
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	JEREZ, RAFAEL 6735 TAMIAMI CANAL ROAD	☐ DELETE	2.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI	TY-ST-ZI TLE AME TREET AD ITY-ST-Z TLE AME TREET AD ITY-ST-Z	DDRESS DDRESS		Change	☐ Addition	) TO
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	JEREZ, RAFAEL 6735 TAMIAMI CANAL ROAD	☐ DELETE	1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NA 4.3 ST 4.4 CI 5.1 TII 5.1 TII 5.1 TII 5.1 TII 5.1 TII 5.1 TII 6.1 TII	TY-ST-ZI TLE  AME TREET AD TTY-ST-Z TLE  AME TREET AD TTY-ST-Z TLE TTY-ST-Z TLE TTY-ST-Z	DODRESS DODRESS DODRESS		Change	☐ Addition	COSEC
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	JEREZ, RAFAEL 6735 TAMIAMI CANAL ROAD	☐ DELETE	2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NA 4.3 ST 4.4 CI 5.1 TIT 5.2 NA	TY-ST-ZI TLE AME TREET AD TTY-ST-Z TLE AME TREET AD TTY-ST-Z TLE TTY-ST-Z TLE AME	DORESS DORESS DORESS		☐ Change	☐ Addition ☐ Addition	
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	JEREZ, RAFAEL 6735 TAMIAMI CANAL ROAD	☐ DELETE ☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NN 4.3 ST 4.4 CIT 5.2 NA CI 6.1 TIT 6.2 NA 6.2 NA 6.4 CI 6.1 TIT 6.2 NA 6.4 CI 6.2 N	TY-ST-ZI TLE TREET AD TREET AD TITY-ST-Z TLE TREET AD TTY-ST-Z TLE TTY-ST-Z TLE TY-ST-Z	DORESS DORESS DORESS DORESS DORESS DORESS		☐ Change	Addition Addition	
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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: