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

Mailing Address

1999 **DOCUMENT # \$54770**

1. Corporation Name

LASPERANZA, INC.

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90135 042 ***150.00



rincipal Place of Business	Mailing Address					
60 S.W. 18TH STREET	6060 S.W. 18TH STREET					
CA RATON FL 33433	BOCA RATON FL 33433			DO NOT WRITE IN T	HIS SPACE	
8	US			3. Date Incorporated or Qualifed		
				05/23/1991		
				4. FEI Number	1 1	lied For
. Principal Place of Business	2a. Mailing Address			65-0265709		Applicable
]					\$8.75 A	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee Rec	uired
	27			6. Election Campaign Financing	\$5.00	
City & State	City & State			Trust Fund Contribution	Added to	Fees
1	28			8. This corporation owes the current year	ar Intangible	ł
Zip Country	Zip	Country		Personal Property Tax.	Yes	□No
7 25	29 30	<u>'L</u>		10. Name and Address of New Registe	ered Agent	
9. Name and Address of Curre	ent Registered Agent	 	Namo	10. 144110 4114		
		81	L			:
Bassolino, ralph Jr. 6060 SW 18th Street		82	Street Add	iress (P.O. Box Number is Not Acceptable)		
BOCA RATON FL 33433		83				
DOOK INTO THE POTEST		84	City		FL 85 Zip C	Code
			1	- A for the purpo	-f shanging its	registered
11. Pursuant to the provisions of Sections 607.0	1502 and 607,1508, Florida Statutes.	, the abov	e-named cor	rporation submits this statement for the purpo tion's board of directors. I hereby accept the	appointment as re	gistered
poont I am familiar with, and accept the our	igations of, Country					
office or registered agent, or both, in the Sta agent. I am familiar with, and accept the obli SIGNATURE					ATE	DRS IN 12
SIGNATURE Stead from two descripted name of registered	agent and title if applicable. (NOTE: Re			ired when reinstating) DA ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	ORS IN 12
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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 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 suppliemental 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 Inister 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: 2

RINTED NAME OF SIGNING OFFICER OR DIRECTOR