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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S58683

(1)

Feb 27 1998 8:00am Secretary of State

ROMA	anoli's investments, in	0.			TY 84811 84811 84811 84811 81831 8481
Principal Plac	v. of Rusinose	Mailing Address	·		8 6 8 6 2 0 8 8 8 6 8 881
Principal Place of Business 825 S. BAYSHORE DRIVE SUITE 1750 MIAMI FL 33131				do not write in	THIS SPACE
				3. Date Incorporated or Qualified	
2. Principal F	Place of Business	2a. Mailing Address		06/11/1991 4. FEI Number	Applied For
21		26		65-0356366	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	**************************************	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	le .	City & State	** *	6. Election Campaign Financing	_ \$5.00 May Be
23 Tim		28		Trust Fund Contribution	
Zip 24	Country 25	Zip 3	Country	8. This corporation owes or has paid the	
24	9. Name and Address of Curren		301	Personal Property Tax due June 30. 10. Name and Address of New Regist	
RODROGUEZ-CHOMAT, LEONORA M. 81 Name					
1471 STILLWATER DRIVE 10550 SW 56 Terrace			62 Street Addr	ess (P.O. Box Number is Not Acceptable)	
MIAMI BEACH FL 88144 Miami, FL. 33173			. 1	oso (* to: Box (to most)p (for / topopiable)	
		•	83		
			84 City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes. th			the above-named corn	oration submits this statement for the puro	
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.					
SIGNATURE					
	Signature, typed or profited name of regetered age		Registored Agent signature require		DATE
12.	OFFICERS AND PSTD	DELETE DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12 Change Addition
NAME .	RODRIGUEZ-CHOMAT, L.		1.2 NAME		C CHANGE C ROUNDI
STREET ADDRESS	-0740-6W-TH-PLACE 1065	USW 56 Terros	1.3 STREET ADDRESS		
CITY-ST-ZIP	-MIAMIFL Mia.	ni, FL. 33173	1.4 CITY-ST-ZIP		
TITLE		, DEFELE	2.1 TITLE		Change Addition
NAME DEGGE ADDRESS			2 2 NAME		
STREET ADDRESS CITY-ST-ZIP			2.3 STREET ADDRESS		
TITLE		DELETE	2 4 CITY-ST-ZIP 31 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
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STREET ADDRESS CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE		DETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY+ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			62 NAME		

6 3 STREET ADDRESS 6.4 CiTY-ST-ZiP 14. Thereby 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 supplimental annual report is tiple and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the leceiver or trustee employered 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 affactment with an address.