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 #

FILED Jan 15 1998 8:00am Secretary of State

•	ion Name R INVESTA)0220 C.		(9)							
Principal Pia	Principal Place of Business				Mailing Address				10014010 110 0111¥ 81110 41010 41018		I DIANI DIBNI DIBN	
14253 SW 94 CR. LANE				14253 SW 94 CR. LANE								
UNIT 101				UNIT 101								
MIAMI FL 33186				MIAMF FL 33186					DO NOT WRITE. IN THIS SPACE.			
								3.	Date Incorporated or Qualified 07/15/1991			
2. Principal Place of Business				2a. Mailing Address				4.	FEI Number			oplied For
21				26				"	65-0277351			ot Applicable
Suite, Apt. #, etc.				Suite, Apt #, etc.							\$8.75	
22				27				5.	Certificate of Status Desired		Fee Re	
City & State				City & State				6.	Election Campaign Financing		\$5.00	May Be
23				28				Trust Fund Contribution			to Fees	
Zip		Country		}		<u> </u>	Country		This corporation owes or has p			
24	25 25 9. Name and Address of Curren			29 30				Personal Property Tax due June 30. 10. Name and Address of New Registered] No
			s of Current	Hegistered Age	int	81	Name	10.	Name and Address of New H	egisterea	Agent	
	LEITAS, ALF					01	Name					
14253 SW 94 CR. LANE							Street A	Address (P.O. Box Number is Not Acceptable)				
UNIT 101												
MIAMI FL 33186												:
						City			FL	85 Zip i	Code	
l office or	r registered ag am f a miliar w	gent, or both, rith, and acce	in the State of pt the obligati	f Horida, Such cons of, Section (thange was 607.0505, FI	authorized by	the corp 3.	oration's b	n submils this statement for the board of directors. I hereby acco	ept the app	changing it pointment as	ts registered registered
12.	Signature, typed		of registered agent : FICERS AND I	and blentapperable	(NOI	II. Registered Ago	nt signature r		reinstating) ADDITIONS/CHANGES TO OFFI	DATE	חומברדה ב	
TITLE	PD		TIOCHS MILE		DELETE	1.1 THLE	—Т	<u>'</u>	ADDITIONS/CHANGES TO OTT	OLAS AN	Change	Addition
	NAME FLEITAS, ALFREDO			1.2 N								
STREET ADDRESS 14253 SW 94 CR LANE #101							ADDRESS					
CITY-ST-ZIP MIAMI FL							1.4 City - S1 - ZIP					
TITLE	SD.			· · · · · · · · · · · · · · · · · · ·	DLLFIE	2 1 TITLE					Change	Add tion
NAME		, CARIDAD	BLANCO			2.2 NAME						
STREET ADDRESS	44454 014 04 05 1445 4444				2.3 S							ĺ
CITY-ST-ZIP	MIAMI F	Ł				2 4 CITY - 5	17-21P					
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NAME						3.2 NAME	j					
STREET ADDRESS	s 					33 STREFT	ADDRESS					
CITY-ST-ZIP						3.4 CITY- 9	31 - 7 1P					
TITLE] DELETE	4 1 111LE					☐ Change	Addition
NAME	[4.2 NAME	1					
STREET ADDRESS	8					4.3 STHEET	ADDRESS					
CITY-ST-ZIP						4.4 CITY - S	1-7IP					
TITLE] DELFTE	5 i 10 l F	[☐ Change	Addition
NAME						5.2 NAME						
STREET ADDRESS	3					5.3 STREET	ADDRESS					
CITY-ST-ZIP	 _				T KOVESE	5 4 CITY - S	T-2IP				— —	min in the
TITLE				L	DELETE	6.1 TITLE					L] Change	Addition
NAME						6.2 NAME						
STREET ADDRESS				6.3 STREET								
CITY-ST-ZIP	1					6.4 CHY-S	1 - 7IP					ĺ

14. Hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Hurther 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