PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90026 004 ***150.00

1. Corporation	MENT # \$72889 C DEPOT INC)							
Principal Place	of Rusiness	Mailing Addr	222			#		All Statt Bratt dt	
Principal Place of Business 5721 SW 25 ST HOLLYWOOD FL 33169 US Mailing Address 5721 SW 25 ST HOLLYWOOD FL 33023 US						DO NOT WRI	TE IN THIS :	SPACE	
00	·					3. Date Incorporated or Qualifed			
					****	08/09/1991			
Principal Place of Business 2a. Mailing Address					4. FEI Number			olied For	
21		26	1			65-0285618			Applicable
Suite, Apt. #, etc. Suite, Apt			.#, etc.			5. Certifcate of Status Desired		\$8.75 A	
City & State		27 City & St	ato:			C. Flantian Compaign Financing			<u>-</u>
23	-	28	ale			Election Campaign Financing Trust Fund Contribution		\$5.00 f Added to	- 1
Zip	Country	Žip		Country		8. This corporation owes the curr	ent vear Inta		
24	25	29	3	10		Personal Property Tax.	one your mile		□No
2-71	9. Name and Address of Currer					10. Name and Address of New F	tegistered /	gent	
				81	Name				
	RIGUEZ, CARLOS A.			82	Street Ad	dress (P.O. Box Number is Not Accepta	able)		
5721 SW 25 ST									
HOLLYWOOD FL 33023			83						
				84	City		FL	85 Zip C	ode
office or re agent. I as	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered age	of Florida. Such cl ations of, Section 6	hange was auti i07.0505, Florid	nonzed by da Statutes	the corpora	orporation submits this statement for the ation's board of directors. I hereby acception with the properties of the control of	DATE DATE	unient as reg	jistered
12.	OFFICERS AN	ND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	P	[.] DELETE	1.1 TITLE				☐ Change	☐ Addition
NAME	RODRIGUEZ, CARLOS A.			1.2 NAME					
STREET ADDRESS	1087 N.W. 145TH STREET			1.3 STREE	TADDRESS				
CITY-ST-ZIP	MIAMI FL.		7 551 575	1,4 CITY-S	T-ZIP			☐ Change	Addition
TITLE	V	Ļ] DELETE	2.1 TITLE				□ Citalige	
NAME	RODRIGUEZ, EDGAR D.			2.2 NAME					
STREET ADDRESS	1087 N.W. 145TH STREET			2.3 STREE					
CITY-ST-ZIP TITLE	MIAMI FL DTS		DELETE-	2.4 CITY-5 3.1 TITLE	51-ZIP			Change	Addition
· · · · · · · · · · · · · · · · · · ·	RODRIGUEZ, MAURICIO A.		_ DELETE = ,4 :	3.2 NAME		~~~ · · ·	*	a-	
NAME	1087 N.W. 145TH STREET				TADORESS				
STREET ADDRESS CITY-ST-ZIP	MIAMI FL			3.4. CITY-5					
TITLE	D		DELETE	4.1 TITLE	31-24			Change	☐ Addition
NAME	RODRIGUEZ, MIREYA A.			4. 2 NAME	-				
STREET ADDRESS	1087 N.W. 145TH STREET				TADDRESS				
CITY-ST-ZIP	MIAMI FL			4.4 CITY-S	T-ZIP				
TITLE			DELETE	5.1 TITLE				☐ Change	Addition
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREE	T ADDRESS				
CITY-ST-ZIP				5.4 CfTY-S	T-ZIP				
TITLE			☐ DELETE	6.1 TITLE				Change	☐ Addition
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREE	TADDRESS				}

CITY-ST-ZIP 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.

6.4 CITY-ST-ZIP

SIGNATURE: