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## 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

## **DOCUMENT # \$73140**

1. Corpora ion Name

**LELLO MIAMI CORP.** 

Principal Place of Business

950 S. MIAMI AVENUE

SUITE 101

MULTIPLY REALTY INVESTMENTS INC.

Mailing Address

950 S. MIAMI AVE

SUITE 101

MIAMI FL 33130   US		MIAMI FL 33130 US		DO NOT WRITE IN THIS SPACE			
				3. Date Ir corporated or Qualifed			
}					08/14/1991		
2 Deineine D	ace of Business	2a. Mailing Address			4. FEI Number	Appie	ed For
	ace or business	<del> </del>				<u> </u>	
21					65-0278859		pplicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	<b>\$8.75</b> Add	
22		27			3. Octimonic of Status 2003/04	Fee Requi	red
City & S:at	e	City & State			6. Election Campaign Financing	\$5.00 Ma	ıv Be
23		28			Trust Fund Contribution	Added to F	
Zip	Country	Zip	Countr		8. This corporation owes the current year Inte	angible	
<del></del>	r	<u>├</u> ¬ '		,	1		No
24	25	29	30		Personal Property Tax.		
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registere 1	Agent	
0	EDWARD III		81	Name			
	ETTE, EDWARD III		82	Stroot Add	Iress (P.O. Box Number is Not Acceptable)		
950 S. MIAMI AVE.			64	Street Aus	iless (F.O. Box Number is Not Acceptable)		
MIAN	AI FL 33130		83	<del> </del>		<del></del> -	
			"	1			
			84	City		85 Zip Cod	e .
					FL		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statu es, 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 neceby accept the appointment as registered							
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE							
	Signature, typed or printed har te of registered agent			nt signature requir	ed when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIC NS/GHANGES TO OFFICERS / N	ID DIRECTORS	
TITLE	PD	☐ DELETE	1.1 TITLE	<u> </u>	<del>-</del>	Change	Addition
NAME	FERRADOR, SERGIO XT.		1.2 NAME	F	ERRADOFI, SERGIO T. SO S. MIAMI AVE.		
STREET ADDRESS	950 S. MIAMI AVE.		13 STREE	TADDRESS C	SO S. MIAMI AVE.		
)	MIAMI FL 33130		14 CITY-	T 70	11AM1 FL 33/30		
C/TY-ST-Z/P		€ per exe	_	51-ZIP -	1171111 2 33160	Change	Addition
TITLE	VPD	<b>™</b> DELETE	2.1 TITLE	{		onange	
NAME	LELLO, LUIZ NETO		2 2 NAME	l			
STREET ADDRESS	950 S MIAMI AVE		2.3 STREE	T ADDRESS			
CITY-ST-ZIP	MIAMI FL		2, 4 CITY-	ST-7IP			
TITLE	U i	DELETE	3.1 TITLE	-		Change	Addition
	ν.,	2 522-12				_ ,	_
NAME	BAUZYS, ALGIRDAS		3.2 NAME	!			
STREET ADDRESS	950 S. MIAMI AVE.		3.3 STREE	TADDRESS			i
CITY-ST-ZIP	MIAMI FL 33130		3.4. CITY-				
TITLE	SD	DELETE	4.1 TITLE	5.	<b>D</b>	Change	Addition
NAME	DE TOLEDO, JOSE R	-	4. 2 NAME	F	ERRANCE SERGIOT.		
	950 S. MIAMI AVE.			TADDRESS C	ERRADOR SERGIOT. ISO S.MIAMIAVE.		
STREET ADDRESS				ADDRESS	MAMI FL 33130		
CITY-ST-ZIP	MIAMI FL		4.4 CITY-	ST-ZIP P	11/41/1   FL 33/30		
TITLE	T	☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME	GILLETTE, EDWARD C III		52 NAME	1			
STREET ADDRESS	950 S. MIAMI AVE.		53 STREE	TADDRESS			
1	MIAMI FL 33130		5.4 CITY-	ST-71P			
CITY-ST-ZIP	MINIMI I'L 33 130	☐ DELETE	6.1 TITLE	+	·	☐ Change	Addition
TITLE		☐ DEFEIE				Gridinge	T version.
NAME			6.2 NAME				
CTOCCT ADDCC: 0			6.3 STREE	T ADDRESS			,

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 of supplemental annual report is tribe 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 composition or the receivar of 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 any attach next with an address, with a lother like empowered.

64 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP