## 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 # S74498

(4)

SUPER YELLOW TAXI ASSOCIATION, INC.

cipal Place of Business	Mailing Address	
11 N.W. 27 AVE.	P.O. BOX 420769	
ALD E1 22142	MIAMI FI 33242	

## **FILED** Apr 13 1998 8:00am Secretary of State



Prin М DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 08/20/1991 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0351139 Not Applicable 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 \$5.00 May Be City & State City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 29 30 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 HERNANDEZ, GILBERT A 3109-11 NW 27TH AVE Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33142** 83 Zip Code City 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ☐ Change ☐ Addition DELETE 1.1 TITLE TITLE HERNANDEZ, GILBERTO 1.2 NAME NAME 3111 N.W. 27 AVE 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE GONZALEZ, CRISTOBAL NAME 2.2 NAME 3111 N.W. 27 AVE. 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 3.1 TITLE TITLE PIERRE-LOUIS, FERNAND 3.2 NAME NAME 3111 N.W. 27 AVE. 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL 3.4. CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE TITLE 4.1 TITLE LOPEZ, ENRIQUE NAME 4. 2 NAME 3109 NW 27TH AVE STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE LOPEZ, ORLANDO 5.2 NAME NAME 3111 N.W. 27 AVE 5.3 STREET ADDRESS STREET ADDRESS MIAMI FL 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 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 conforation of 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 chapter or or an attachment with an address.

SIGNATURE:

ORLANDO LOPEZ, D.

4-7-98

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