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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # \$80829

SIGNATURE

AAA DIE-CUTTING AND HOT STAMPING CORP.

Principal Place	e of Business	Mailing Address			•	, 199/1918 (97/8))); 25(5) (8/18 1/9/8 (9/1 2))		J. J. F. F. F. 1881
715 W. 27 ST 715 W 27 ST								•
HIALEAH FL 33010 HIALEAH FL 33010						DO NOT WRITE IN TH	IIS SPACE	
US US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
	-					09/17/1991		
- D-i11 D	lace of Business '-	2a. Mailing Address				4. FEI Number		pplied For
- i	lace of Business -	H				65-0288181		ot Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.						Additional
¬ ` '	#, etc.	27				5. Certifcate of Status Desired	•	equired
City & Stat	Δ	City & State				6. Election Campaign Financing	\$5.00	May Be
— ·		28				Trust Fund Contribution	· · · · · ·	to Fees
23 Zip	Country	Zip	Col	ıntry		8. This corporation owes the current year	Intangible	
24	25	29	30	•		Personal Property Tax.	∐Yes	Ν̈́ο
241	g. Name and Address of Curre		1001. —			10. Name and Address of New Register	d Agent	
				81	Name			1
VIZC	CAINO, ALEXANDER			82	Ctroot Addro	ess (P.O. Box Number is Not Acceptable)		
3160) SW 140TH ST.			102	Street Addre	155 (P.O. Box Number is 140t Acceptable)		
MIAI	VII FL 33175			83				
				\sqcup				0.4-
				84	City	F	L 85 Zip	Code
SIGNATURE	m familiar with, and accept the oblig				signature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
12. Πιδε	PD -	DELETE		ITLE	T.	ADDITIONO CHANGE TO CITIOENS	Change	Addition
NAME.	VIZCAINO, ALEXANDER	1.2 N				- .		
	OAGO CHE AACTIL AVE		1		ADDRESS			
STREET ADDRESS	MIAMI FL			ITY-ST-	1			
CITY-ST-ZIP TITLE	VD	☐ DELETE	2.1 T		·ZIF		Change	Addition
-	VILCAINO, ALEXANDER			IAME				Í
NAME	3160 S.W. 140 AVE.			2.3 STREET ADDRESS				
STREET ADDRESS	A 11 A 2 A 2 PM			CITY-ST	l			ļ
CITY-ST-ZIP TITLE	SD	☐ DELETE	3.17		-211		Change	Addition
NAME	VIZCAINO, MILMA	<u></u>		IAME				
	0400 014/ 440 41/7				ADDRESS			į
STREET ADDRESS	MIAMI FL			CITY-ST				\$
CITY-ST-ZIP TITLE	TD			ME			Change	Addition
NAME	VIZCAINO, MILMA	_		NAME .				ļ
STREET ADDRESS					ADORESS		•	İ
CITY-ST-ZIP	MIAMI FL			TY-ST	- 1			ļ
TITLE	iver tivis 1 to	☐ DELETE	_	TILE	_		☐ Change	☐ Addition
NAME				IAME				
STREET ADDRESS			5.3 \$	TREET	ADDRESS		•	ţ
CITY-ST-ZIP			5.40	TY-ST	-ZIP			
TITLE	-	☐ DELETE		IILE -			Change	Addition
NAME]		6.21	IAME				-
OTDEET ADDRESS			6.3 5	TREET	ADDRESS			ŧ

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 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 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 chapter 607 on an attachment withy an address, with all other like empowered.

6.4 CITY-ST-ZIP

305 8 8 8 8804

FILED

May 01, 1999 8:00 am Secretary of State

05-01-1999 90038 019 ***150.00