SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # SR1024

(0)

FILED Aug 05 1998 8:00am Secretary of State

	1. Corporation Name SO 1024 (9)								
ORLAND	O LOLI & A	ASSOCIATES, I	INC.						
								4 100/03/0 102 10/01 (400) E02/10 (40) B10/1 B10/1	IABH ÁRBH BHBH BHBH BHBH IBBH
Principal Plac			Mailing Address						
2940 S.W. 30TI	h av en ue		3384 N.E. 167TH ST. SUITE 1207						
BAY #1 HALLANDALE FL 33009				NORTH MIAMI BEACH FL 33160				DO NOT WRITE IN THIS SPACE	
US			US					3. Date Incorporated or Qualified	
								09/18/1991	
2. Principal P	lace of Busines	2a. Mailing A	2a. Mailing Address				4. FEI Number	Applied For	
21			26					65-0284088	Not Applicable
Suite, Apt. #, etc.			Suite, Ap	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			City & St	City & State				6. Election Campaign Financing	\$5.00 May Be
23			28	- I I				Trust Fund Contribution	Added to Fees
Zip	— i ′			Zip		Country		8. This corporation owes or has paid the current year Intengible	
24	25 9. Name and Address of Curren			29 30				Personal Property Tax due June 30. X Yes No	
1011		d Address of Curr	ent Registered Age	nt		31 1	Name	10. Name and Address of New Registered	Agent
LOLI, ORLANDO					Ľ	Ή.	Itallic		
3384 N.E. 167TH ST. North Miami Beach Fl 33160						32 3	Street Addre	ddress (P.O. Box Number is Not Acceptable)	
NONIR MIAMI DEACH FL 33100				}		33			
						<u> </u>			
_					84 City			FL	85 Zip Code
11. Pursuant	t to the provision	s of sections 607.05	502 and 607,1508, FI	lorida Statutes	the abov	ve-na	med corpora	ation submits this statement for the purpose of ch	anging its registered
agent. L	registered agen am f am lliar with,	end except the obl	igations of section 6	nange was a 607.0505, Flo	ulnorized i rida Statut	by m tes.	e corporation	ation submits this statement for the purpose of chairs board of directors. I hereby accept the appoint	ntment as registered
SIGNATURE	-								
12.	Signature, typed or p	Hilled name of registered a	gent and tille if applicable.	(NO:	TE: Registered	d Agen	Il signature requir	ADDITIONS/CHANGES TO OFFICERS AF	ID DIDECTORS IN 12
TITLE D			IND DIRECTORS	DELETE			<u>-</u>	ADDITIONS/CHANGES TO OFFICERS A	
NAME LOU, ORLANDO			L-] DEFE 15	1.2 NAME				Change Addition
STREET ADDRESS 3384 N.E. 167TH ST.				1.3 STREET ADDRESS		DRESS		İ	
CITY-ST-ZIP NORTH MIAMI BEACH FL						-ST-ZIF	1		
TITLE				DELETE	2.1 TITLE				Change Addition
NAME			L	J D L L L L	22 NAME				Cital So Cital Transion
STREET ADDRESS				2.3 STREET ADDRESS		DRESS		·4	
CITY-ST-ZIP				2.4 CITY-S		-ST-ZIF	-		
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STREET ADDRESS				3.3 STREET ADDRESS		DRESS			
CITY-ST-ZIP					3.4 CITY	ST-ZIF	·		
TITLE			Ĺ.	DELETE	4.1 TITLE		İ		Change Addition
NAME			4.2 NAME						
					4.3 STREET ADDRESS				
CITY-ST-ZIP						4.4 CITY-ST-ZIP			
المارية								L Change Addition	
						pocoo			
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] DELETE					Obanes Davide
) NETE E	1				☐ Change ☐ Addition
STREET ADDRESS							DRESS		ł
CITY-ST-ZIP					6.3 STREET ADDRESS 6.4 CITY-ST-ZIP				
\$TREET ADDRESS				DELETE	4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAMI	ET ADI	DRESS		Change Addition Change Addition

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 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 an appear with an address.

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