## 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 #

Corporation Name

EGUSQUIZA, INC.

(3)

FILED Feb 06 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address		I LOGISONO EDI NOTAD LITAR OTTI E LIBERI OTTI OTDIT O	IBIN BIBIN BIBIN BIBIN ÈNUN KAN
7100 W. 20TH AVENUE 7100 W. 20TH AVENUE					
#302 HIALEAH FL 33016 HIALEAH FL 33016				DO NOT VIDITE ALT.	0.004.05
HIALEAN FL	33016	HIALEAH FL 33016		DO NOT WRITE IN THI  3. Date Incorporated or Qualified	S SPACE
				09/30/1991	
2. Principal P	lace of Business	2a. Mailing Address	n //	4. FEI Number	Applied For
	SW 107 AUE	26 3°220 S	N 109 Du	- 65-0300273	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stat		City P. State			Fee Required
23 MIA	MI FI	City State	EI	6. Election Campaign Financing  1 rust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 33/0	Country ) ade	7 23/101	Country	8. This corporation owes or has paid the c	
24 33/	9. Name and Address of Current	Begistered Agent	0 000	Personal Property Tax due June 30.  10. Name and Address of New Registere	Yes No
A Z REGISTERED AGENT CORPORATION  81 Name					
2801 & RAYSHORE DR					
STE. 1600			ress (P.O. Box Number is Not Acceptable)		
	AMI FL 33133		83		
				***************************************	
			84 City	F	L B5 Zip Code
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					
	Signature, typed or prioted nume of registered agent		legistered Agent signature requir		
12.	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	
NAME	EGUSQUIZA, JULIO		1.1 TITLE		L Change Addition
STREET ADDRESS	7100 W. 20TH AVE.,#302		1.2 NAME		
CITY-ST-ZIP	HIALEAH FL		1.3 STREET ADDRESS		
TALE		DELETE	1.4 CITY - S1 - ZIP 2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - 7IP		
TITLE		DELETE	31 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STHEET ADDRESS		
CITY-ST-ZIP			3.4 CHY-S1-ZIP	•	
TITLE		☐ DELET <b>e</b>	4.1 1ITLF		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 C(1) Y - \$1 - Z(1)2		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME	.1 1 1 1	
STREET ADDRESS			5 3 STREET ADDRESS	Marilas	
CITY-ST-ZIP			5.4 CITY - ST - ZIP	on 2/6/98	
TITLE		☐ DELFTE	G.1 TITLE	A TO A STATE OF STATE	Change Addition
NAME			6.2 NAME	1000024245	COLUL POA
STREET ADDRESS			63 STREET ADDRESS	-02/09/98010100 ***155.00	IC.4
CITY-ST-ZIP			6 4 CITY-ST-ZIP	***100.UU	

14. Thereby 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 suppliemental acquait poort is true and according 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 further 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 an articular and interest a

0-1.11CC