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 # \$90430

1. Corporation Name

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90032 046 ***150.00

	L TECHNOLOGIES CORP.						
Principal Place	e of Business	Mailing Address				IN BEBER BIGH BIBER	ETET OISH TER
1782 NW 82ND AVENUE 1782 NW 82ND AVENUE							
MIAMI FL 33126 MIAMI FL 33126							
					DO NOT WRITE IN The 3. Date Incorporated or Qualifed	1IS SPACE	
					1 T		
Principal Place of Business 2a, Mailing Address				10/29/1991 4. FEI Number		oplied For	
21 10431 NW 28 ST # E-105 26 SAME LEFT -					65-0293815		ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.							Additional
22 HIAN(27					5. Certifcate of Status Desired	Fee Re	equired
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23 RORIA - 28					Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Count	гу	8. This corporation owes the current year		
24 3317			30		Personal Property Tax.	Yes	□No
	9. Name and Address of Curren	t Registered Agent		d N	10. Name and Address of New Register	ed Agent	
TEDE	DAR DICADDO CHER		ľ	1 Name			
TERRAB, RICARDO CHEB 10431 N.W. 28 STREET			8	2 Street Add	dress (P.O. Box Number is Not Acceptable)		ļ
#E-105			١.	3			
	MI FL 33172			3			
MIAMI FL 33172			8	4 City		85 Zip	Code
P	the annihim of Continue 607 060	2 and 607 1609 Elorida Statute	e the abo	we-pamed cor	maration authorite this statement for the purpose	of changing its	registered
office or re	paietared agent or both in the State (of Florida. Such change was au	imonzea t	ov the corporal	tion's board of directors. I hereby accept the ap	pointment as re	egistered
agent. Lar	m familiar with, and accept the obligat	tions of, Section 607.0505, Flor	nua Statut	#S.]
SIGNATURE							
	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE:	Registered A	gent signature requi	ired when reinstating) DATE		
12.	Signature, typed or printed name of registered agen OFFICERS AN	it and title if applicable. (NOTE: D DIRECTORS	Registered A	gent signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	
							DRS IN 12
12.	OFFICERS AN	D DIRECTORS	13.			AND DIRECTO	
12.	OFFICERS AN	D DIRECTORS	13. 1.1 TITU 1.2 NAM			AND DIRECTO	
12. TITLE NAME	OFFICERS AN DPT TERRAB, RICARDO CHEB 10431 N.W. 28 STREET #E-105 MIAMI FL 33172	D DIRECTORS	13. 1.1 TITU 1.2 NAM 1.3 STR	E E		AND DIRECT(☐ Change	Addition
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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 corporation 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 changed, or prifar attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

RICA 400 CHOS TERRAS - PRECIDENT TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR