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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMEN	<b>VT</b> #	VO!	5393

1. Corporation Name

CHANGES BY ROGER OF BEVERLY HILLS, INC.

						1	I I BOOK BILDER BOUNT DELAN STEEN TE	HEE THE ETERN BUS	// B1814 B1844 1	81811 B1811 1881
Principal Place	e of Business	Mailing Address			Ĭ	1				
6545 SW 90TH		6545 SW 90TH COURT								
MIAMI FL 33173 US		US	MIAMI FL 33173		[	DO NOT WRITE IN THIS SPACE				
00							Date Incorporated or Qualifed			
2 Principal P	lace of Business	2a. Mailing Address					El Number	• • •	Ar	oplied For
21		26				6	5-0307884	,	N/	ot Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.						it	\$8.75	Additional
22		27				5.	Certificate of Status Desired	1	Fee Re	equired
City & State	ė	City & State				6. E	Election Campaign Financing		\$5.00	May Be
23		28					rust Fund Contribution			to Fees
Zip	Country	Zip	Country	7		8. T	This corporation owes the cur	ent year Inta	ngible	
24	25	29 3	0			F	Personal Property Tax.		Yes	□ No
	9. Name and Address of Currer	nt Registered Agent		_		10. N	Name and Address of New	Registered A	.gent	
0.10	DW I O DOCED		81		Name					
	rillo, roger SSW 90th Court		82	+	Street Addres	ss (P.0	D. Box Number is Not Accept	able)		
	# FL 33173		83	-						
			84	L	City				85 Zip	Code
				1	•			<u>FL</u>		
office or n agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auti	horized by	th	named corpora e corporation!	ration : n's boa	submits this statement for the rd of directors. I hereby acce	purpose of o pt the appoin	hanging its tment as re	s registered egistered
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: R	legistered Age	nt si	signature required w	when rein	nstating)	DATE		
12.	OFFICERS AN	ID DIRECTORS	13.			Αl	ODITIONS/CHANGES TO OF	FICERS AND		
TITLE	PD	☐ DELETE	1.1 TITLE						Change	☐ Addition
NAME	CARRILLO, ROGER		1.2 NAME							
STREET ADDRESS	6545 SW 90TH COURT		1.3 STREE	TAL	DDRESS					
CITY-ST-ZIP	MIAMI FL 33173		1.4 CITY-S	T- Z	ZIP					
TITLE		☐ DELETE	2.1 TITLE						☐ Change	☐ Addition
NAME			2.2 NAME							
STREET ADDRESS			2.3 STREE	TAC	DDRESS					
CITY-ST-ZIP			2. 4 CITY-	ST-Z	ZIP					
TITLE		☐ DELETE	3.1 TITLE						Change	Addition
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREE	TAL	DDRESS					
CITY-ST-ZIP			3.4. CITY-	ST-7	ZIP					
TITLE		☐ DELETE	4.1 TITLE						Change	Addition
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREE	TAE	DDRESS					
CITY-ST-ZIP			4.4 CITY-S	t-z	ZIP					
TITLE		☐ DELETE	5.1 TITLE						Change	Addition \
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREE	T AL	DORESS					
CITY-ST-ZIP			5.4 CITY- S	ST-Z	ZIP					
TITLE		☐ DELETE	6.1 TITLE						☐ Change	☐ Addition
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREE	TAC	ODRESS					
			_		1					

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 on an attachment with an address, with all other like empowered.

SIGNATURE: