Applied For

Fee Required \$5.00 May Be

Added to Fees

Not Applicable \$8.75 Additional

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

DOCUMENT # V35920

1. Corporation Name

| Principal Place of Business | Mailing Address | | | | |
|--|--|--|--|--|--|
| 2907 DOUGLAS RD (SW 37TH AVE) SUITE 401 MIAMI FL 33145 | 2307 DOUGLAS RD (SW 377H AVE) Suite 401 Miami FL 33145 | | | | |
| | 2a. Mailing Address | | | | |
| Principal Place of Business 21 | — <u> </u> | | | | |
| Suite, Apt. #, etc. | — ĭ | | | | |
| Suite, Apt. #, etc. City & State | Suite, Apt. #, etc. | | | | |
| 21 Suite, Apt. #, etc. | Suite, Apt. #, etc. 27 City & State | | | | |

FILED Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90127 011 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

Trust Fund Contribution

05/13/1992 4. FEI Number

65-0337976

| Signature. Typed or printed name of registered agent and title of applicable. NOTE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS N 12 | 24 | 25 | 29 | 30 | | | Personal Property Tax. | | ∐No |
|---|----------------|--|---------------------------|----------------|----------|-------------------|--|---------------------------------------|------------|
| JIMENEZ, MARIO 2307 DOUGLAS RD (SW 37TH AVE) SUITE 401 MIAMI FL 33145 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code: 1 85 Jimen Address (P.O. Box Number is Not Acceptable) 86 Street Address (P.O. Box Number is Not Acceptable) 87 Street Address (P.O. Box Number is Not Acceptable) 88 Street Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Acceptable) 80 Street Address (P.O. Box Number is Not Acceptable) 81 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code: 1 85 Zip Code: 1 86 Zip Code: 1 87 Street Address (P.O. Box Number is Not Acceptable) 85 Street Address (P.O. Box Number is Not Acceptable) 86 Street Address (P.O. Box Number is Not Acceptable) 87 Street Address (P.O. Box Number is Not Acceptable) 88 Street Address (P.O. Box Number is Not Acceptable) 89 Zip Code: 1 80 | _ | 9. Name and Address of Current | Registered Agent | | | | 10. Name and Address of New Reg | istered Agent | |
| 2307 DOUGLAS RD (SW 37TH AVE) SUITE 401 MIAMI FL 33145 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the adversarian submits this statement for the purpose of changing are gristered 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, are 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, are 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 ag | | | | | 81 | Name | | | |
| SUITE 401 MIAMI FL 33145 84 City FL 85 Zip Code formation of the provisions of Sections 607 0502 and 607 1508. Florida Statules, 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, and mailinar with, and accept the obligations of, Section 807,0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and mailinar with, and accept the obligations of, Section 807,0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and mailinar with, and accept the obligations of, Section 807,0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and an accept the appointment as registered agent, and an accept the appointment as registered agent, and accept the appointment as registered agent, and accept agent, and | | | | | 00 | Ct | (B.O. Boy Number is Not Assentable | · · · · · · · · · · · · · · · · · · · | |
| MIAMI FL 33145 B4 City FL S5 Zip Code | 2307 | Douglas RD (SW 37TH AVE) | | | 02 | Street Addr | ess (P.O. Box Nulliber is Not Acceptable | , | ÷ |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1509, Florida Statutes, above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 607.0505, Florida Statutes. Signature Signat | SUIT | E 401 | | | 83 | | | , | |
| 11. Fursuant to the provisions of Sections 607.0502 and 607.1508. Florids 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 607.0506, Florida Statutes. SIGNATURE S | MIAN | MI FL 33145 | | | | | | | |
| 11. Pursuant to the provisions of Sections 607 6902 and 607 1509. 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, and the million with, not all the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and the million with, not accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THE SUMME JIMENEZ, MARIO 12. NAME 33. STREET ADDRESS JIMENEZ, MARIO 3307 SW DOUGLAS RD \$401 13. STREET ADDRESS JIMENEZ, MARIO 337 SIRECT ADDRESS JIMENEZ, MARIO 338 TREET ADDRESS JIMENEZ, MARIO 34. STREET ADDRESS JIMENEZ, MARIO 35. STREET ADDRESS JIMENEZ, MARIO 35. STREET ADDRESS JIMENEZ, MARIO 36. STREET ADDRESS JIMENEZ, MARIO 37. STREET ADDRESS JIMENEZ, MARIO 38. STREET ADDRESS JIMENEZ, MARIO 39. STREET ADDRESS JIMENEZ, MARIO 30. STREET ADDRESS JIMENEZ, MARIO JIMENEZ, | | | | | 84 | City | | ## 85 Zip C | |
| 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 and accept the obligations of, Section 607/505/Florida Statutes. SIGNATURE Signature, Typed or protect name of registered agent and tise if applicable. NOTE Registered Agent agreeture required when reinstating) DATE 12. OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS IN 12 INTERESTANCES JIMENEZ, MARIO 2307 SW DOUGLAS RD #401 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITY-ST-ZIP MIAMI FL JIMENEZ, MARIO 2307 SW DOUGLAS RD #401 13. STREET ADDRESS JIMENEZ, MARIO 2307 SW DOUGLAS RD #401 14. CITY-ST-ZIP MIAMI FL JELETE | 11 D | 4- 4isia of Sections 507 0502 | and 607 1509. Elected S | tatutos the | above | named com | paration submits this statement for the nur | | |
| Signature typed to protect name of registered agent and tile of applicables. NOTE Repostered Agent signature required when initiating) DATE | office or r | egistered agent, or both, in the State of | Florida. Such change w | as authorize | ed by t | he corporation | on's board of directors. I hereby accept the | e appointment as reg | istered |
| 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE S | SIGNATURE | | | | | | | DATE | |
| ITILE S JMENEZ, MARIO 2307 SW DOUGLAS RD \$401 MIAMI FL DELETE 21 TITLE Addition MIAMI FL DELETE 22 NAME 23 STREET ADDRESS STREET ADDRESS 23 STREET ADDRESS 24 CITY-ST-ZP MARIO 33 STREET ADDRESS 24 CITY-ST-ZP MARIO 35 STREET ADDRESS 36 CITY-ST-ZP ADDRESS 37 STREET ADDRESS 38 STREET ADDRESS 48 CITY-ST-ZP MARIO 48 STREET ADDRESS 48 CITY-ST-ZP MARIO 58 STREET ADDRESS 59 STREET | | <u> </u> | | | <u> </u> | signature require | | | PS IN 12 |
| JIMENEZ, MARIO 2307 SW DOUGLAS RD #401 13 STREET ADDRESS JIMENET ADDRESS MIAMI FL DELETE 21 TITLE VAME 22 STREET ADDRESS STREET ADDRESS 22 STREET ADDRESS 22 STREET ADDRESS 22 STREET ADDRESS 22 STREET ADDRESS 23 STREET ADDRESS 24 CITY, ST-ZP TITLE DELETE 31 TITLE Change Addition AMME STREET ADDRESS 33 STREET ADDRESS 33 STREET ADDRESS 33 STREET ADDRESS 34 CITY, ST-ZP TITLE ADDRESS STREET ADDRESS 34 CITY, ST-ZP TITLE ADDRESS STREET ADDRESS 35 STREET ADDRESS 36 STREET ADDRESS 37 | | | | | | | ADDITIONS/CHANGES TO CITTLE | | |
| STREET ADDRESS 2307 SW DOUGLAS RD #401 INCHEMINE MIAMI FL INCHEMINE DELETE 21 TITLE 22 NAME 23 STREET ADDRESS DITY-ST-ZPP DELETE 31 TITLE 32 NAME 32 NAME 32 NAME 33 STREET ADDRESS DITY-ST-ZPP DELETE 41 TITLE Change Addition Add | TITLE | , · | □ acrei | | | | • | | |
| MIAMI FL 14 CITY-ST-ZIP TITLE 21 TITLE 22 NAME 23 STREET ADDRESS CITY-ST-ZIP TITLE 24 CITY-ST-ZIP TITLE 24 CITY-ST-ZIP TITLE 24 CITY-ST-ZIP TITLE 25 NAME 37 STREET ADDRESS 37 STREET ADDRESS 38 STREET ADDRESS TITLE 39 STREET ADDRESS TITLE 40 Change Addition Additi | NAME | | | 1.2 | NAME | | | | ŀ |
| DELETE | STREET ADDRESS | = : : : | | 1.3 | STREET | ADDRESS | , | ı | |
| MAME | CITY-ST-ZIP | MIAMI FL | | | CITY-ST- | ZIP | | · · · · · · | 7.4.55 |
| 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | TITLE | | ☐ DELET | E 2.1 | TITLE | | | ☐ Change | Addition |
| 2 4 CITY- ST-ZIP | NAME | | | 2.2 | NAME | | | | |
| Change | STREET ADDRESS | | | 2.3 | STREET | ADDRESS | 1 | • | |
| TITLE | CITY-ST-ZIP | · | | 2. 4 | CITY-ST | - ZIP | | + +++-5 + | |
| STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP ITITLE VAME 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP ITITLE DELETE 4.4 CITY-ST-ZIP ITITLE NAME 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP STREET ADDRESS 5.5 STREET ADDRESS 5.6 CITY-ST-ZIP STREET ADDRESS 5.7 STREET ADDRESS 5.8 STREET ADDRESS 5.9 STREET ADDRESS 5.9 STREET ADDRESS 5.1 STREET ADDRESS 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP STREET ADDRESS 6.3 STREET ADDRESS | TITLE | | ☐ DELET | E 3.1 | TITLE | | _ | Change | ☐ Addition |
| STREET ADDRESS CITY- ST-ZIP TITLE DELETE 4.1 TITLE 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY- ST-ZIP TITLE DELETE 4.4 CITY- ST-ZIP TITLE DELETE 5.1 TITLE STREET ADDRESS CITY- ST-ZIP TITLE DELETE 5.3 STREET ADDRESS CITY- ST-ZIP TITLE STREET ADDRESS CITY- ST-ZIP DELETE 5.3 STREET ADDRESS CITY- ST-ZIP TITLE DELETE 5.1 TITLE Change Addition Addition Addition CONTACT STREET ADDRESS CITY- ST-ZIP CONTACT STREET ADDRESS CONTACT STREET ADDR | NAME | | | 3.2 | NAME | | • | • | Ì |
| 34. CITY-ST-ZIP TITLE | | | | 3.3 | STREET | ADDRESS | | | |
| TITLE VAME 4.1 TITLE VAME 4.2 NAME 4.3 STREET ADDRESS CITY- ST- ZIP TITLE NAME 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS CITY- ST- ZIP TITLE DELETE 5.1 TITLE STREET ADDRESS CITY- ST- ZIP TITLE NAME 5.3 STREET ADDRESS CITY- ST- ZIP TITLE NAME 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS CITY- ST- ZIP TITLE NAME 6.4 CITY- ST- ZIP 1.4 Liberably 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 | | | | 34 | CITY-ST | - 7IP | | • | ľ |
| A 2 NAME STREET ADDRESS CITY- ST- ZIP DELETE DELETE STREET ADDRESS CITY- ST- ZIP CITY- ST- Z | ** | | ☐ DELET | | | | | Change | Addition |
| A3 STREET ADDRESS CITY- ST-ZIP DELETE DELETE S1 TITLE S2 NAME STREET ADDRESS CITY- ST-ZIP CITY- ST-ZIP DELETE S1 TITLE S2 NAME S3 STREET ADDRESS S4 CITY- ST-ZIP S5 A CITY- ST-ZIP CTANAME STREET ADDRESS STREET ADDRE | • | | | 4.2 | NAME | | | | |
| A4.CITY-ST-ZIP TITLE DELETE 5.1 TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition Addition Addition CITY-ST-ZIP TITLE CHANGE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.4 Liberably 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 | | | | | | ADDRESS | | | ! |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP Addition Addition Addition Addition Addition 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 1.4 Liberably certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i) Florida Statutes. I further certify that the information | | | | 8 | | | , | , | |
| STREET ADDRESS 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 1.4 Liberably 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 | | | □ DELET | | | - 21 | | . Change | Addition |
| 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE CAMME 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.4 Liberably 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 | | | | | | ' | | _ 3 | _ |
| 54 CITY-ST-ZIP 54 CITY-ST-ZIP 55 CITY-ST-ZIP 55 CITY-ST-ZIP 56 CITY-ST-ZIP 57 CITY-ST-ZIP 58 CITY-ST-ZIP 59 CITY-ST-ZIP 50 STREET ADDRESS 60 STREET ADDRESS 64 CITY-ST-ZIP 17 | | | | | | ANDRESS | | | |
| DELETE 6.1 TITLE 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY- ST-ZIP 1.4 Liberably certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i) Florida Statutes. I further certify that the information | | | | | | | | | • |
| 62 NAME 62 NAME 63 STREET ADDRESS 61 STREET ADDRESS 64 CITY-ST-ZIP 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP 64 CITY-ST-ZIP 65 NAME 65 STREET ADDRESS 66 CITY-ST-ZIP 66 NAME 66 STREET ADDRESS 67 CITY-ST-ZIP 67 NAME 68 STREET ADDRESS 68 CITY-ST-ZIP 68 NAME 69 NAME 69 NAME 69 NAME 69 NAME 69 NAME 60 STREET ADDRESS 60 NAME 60 NAM | CITY-ST-ZIP | | □ proct | | | · Ur | | Change | ☐ Addition |
| 6.3 STREET ADDRESS CITY- ST-ZIP 14. Liberably certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i) Florida Statutes. I further certify that the information | TITLE | | □ DETE I | _ | | ļ | | | |
| 6.4 CITY-ST-ZIP 14. L hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i) Florida Statutes. I further certify that the information | NAME | | | | | | | | |
| 14. I hereby cartify 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 | STREET ADDRESS | | | | | | | | |
| 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 | CITY-ST-ZIP | | | | | | | | |
| | 14. I hereby | certify that the information supplied with | this filing does not qual | ify for the ex | emptic | n stated in S | Section 119.07(3)(i), Florida Statutes. I fu | ther certify that the in | nformation |

SIGNATURE: