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

PROFIT CORPORATION ANNUAL REPORT

1999



Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # V54716

1. Corporation Name

PASCHBERG, INC.

Principal Place of Business

Mailing Address

FILED Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90007 041 ***150.00



13701 SW 78 PLACE 13701 SW 78 PLACE										
MIAMI FL 33158 MIAMI FL 33158					DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualifed		A		1
			- الماليات			08/03/1992				نتث
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		A	pplied For	
26						65-0350926		N	ot Applicable	l
Suite, Apt. i	Suite, Apt. #, etc.	ite, Apt. #, etc.					\$8.75	Additional	ŀ	
22		27				5. Certificate of Status Desired]	Fee R	equired	
City & State		City & State				6. Election Campaign Financing	<u> </u>	\$5.00	May Be	
23		28				Trust Fund Contribution	ם	•	to Fees	
Zip	Country Zip Cou			ntry		8. This corporation owes the current	year Intang	gible		ł
24	25 29 30					Personal Property Tax.		Yes	≥ €\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
9. Name and Address of Current Registered Agent						10. Name and Address of New Reg	istered Ag	ent		1
				81	Name					1
MURAI, WALD, BIONDO & MORENO, P.A.					- A A I I	(D.O. B., M. sebes in Not Apportable				ĺ
900		82 Street			ess (P.O. Box Number is Not Acceptable	?)				
25 S			83		L. L. Departer			-		
MIAN	VII FL 33131									
				84	City		FL	85 Zip	Code	
		1 CO7 4500 Flacida Etatuta	a tha a		named corn	oration submits this statement for the pu	:	anning its	s registered	
office or re	egistered agent, or both, in the State o	of Florida. Such change was au	uthonzed	ı by ı	ine corporatio	on's board of directors. I hereby accept to	ne appointn	nent as re	gistered	Į
agent. I ar	m familiar with, and accept the obligati	ions of, Section 607.0505, Flor	ida Statı	utes.					i	1
SIGNATURE							DATE			۱ ـ
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Register					t signature required	ADDITIONS/CHANGES TO OFFIC		DIRECTO	ORS IN 12	g
12.		D DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC		Change	Addition	-
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NAME	06.172.17			1.2 NAME						3
STREET ADDRESS				1.3 STREET ADDRESS						Ä
CITY-ST-ZIP	MIAMI FL 33158		1.4 CITY-		-ZIP			70	- Addition	P
TITLE	VP	☐ DELETE	2.1 TITLE				L	Change	☐ Addition	`
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CITY-ST-ZIP	MIAMI FL 33196		2.4 C	2.4 CITY-ST-ZIP						
TITLE	☐ DELETE 3.1 TI		TLE			[Change	☐ Addition		
NAME	3.21		3.2 N	AME						ļ
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CITY-ST-ZIP	<i>•</i>		34 C	ITY-S1	T-7IP					
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NAME				4. 2 NAME						-
STREET ADDRESS.				4.3 STREET ADDRESS						}
				4.4 CITY-ST-ZIP						1
CITY-ST-ZIP		☐ DELETE	5.1 TITLE		-217			Change	Addition	
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NAME					ADDRESS					
STREET ADDRESS										
CITY-ST-ZIP				TY-ST	-ZIP			Change	Addition	1
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NAME (6.2 N							
STREET ADDRESS		6.3 S1	REET	ADDRESS			•			
	·		6.4 CI	64 CITY+ST+ZIP						l

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:

SIGNATURE

SIGNATURE

SIGNATURE

SIGNATURE

SIGNATURE

SIGNATURE

**Total Control 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.

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