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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 20 1998 8:00am Secretary of State

	1998 DIVISION OF CORPORATIONS				NS		<b>-</b> ~			
	MENT #	V63336	(4)							
Principal Plac	e of Business	<del></del>	Mailing Address				- I HORRY MINDIO DIVON HIND HIND DIVIN DISH GEBIT DIDIS	Aibil ainit nt	011 Statt (001	
1830-40 SOUTH TREASURE DRIVE 1830-40 SOUTH TREASURE										
#14 #14										
NORTH BAY VILLAGE FL 33141 NORTH BAY VILLAGE FL 33					3141		DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified 09/10/1992			
9. Principal F	Place of Busines	<u> </u>	2a. Mailing Address	<del></del>			4. FEI Number	<del></del>	Applied For	
21	idos or Ellamos		26				65-0359451		Not Applicable	
Sulte, Apt.	#. etc.		Suite, Apt. #, etc.				1		Additional	
22			27				5. Certificate of Status Desired		Regulred	
City & Stat	te		City & State				6. Election Campaign Financing	\$5.0	0 May Be	
23	28						Trust Fund Contribution Added to Fees			
Zip	Country Zip			Cou	ntry		8. This corporation owes or has paid the cur	is paid the current year Intangible		
24	25			30				□ No		
		d Address of Current	Registered Agent				10. Name and Address of New Registered	Agent		
	Lido, Pedro				81	Name			ı	
8101 CRESPI BLVD.					82 Street Address (P.O. Box Number is Not Acceptable)					
APT. #503					_					
MIAMI BEACH FL 33141					83				İ	
				ŀ	84	City		<b>85</b> Zip	Code	
							FL			
11. Pursuant office or r	to the provision registered agen	s of Sections 607.0502 I, or both, in the State o	and 607.1508, Florida <b>Sta</b> tu f Florida: Such change <b>wa</b> s	ites, the ab authorized	ove-r i by t	named corpo the corporation	oration submits this statement for the purpose of on's board of directors. I hereby accept the app	changing ointment a	its registered   is registered	
	ım <b>fam</b> iliar with,	and accept the obligat	ions of, Section 607. <b>0505</b> , F	lorida Statu	utes.	•				
SIGNATURE	Signature, typed or p	ofinted name of registered agent	and tibe if applicable (NO	TI Registered	Agent	signature require	d when reinstating) DATE		———— I	
12.		OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	PRS IN 12	
TITLE	D		☐ DELETE	.ETE 1.1 TITO				Change	Addition	
NAME	VALIDO, PEDRO L.			1.2 NA	1.2 NAME				1	
STREET ADDRESS				1.3 ST/	1.3 STREET ADDRESS 1.4 CITY - ST - ZIP				li	
CITY-ST-ZIP	MIAMI BEACH FL			1.4 CtT			· ·			
TITLE	D		L] DELETE	2.1 TITLE				Change	Addition	
NAME	VALIDO, RAQUEL			2.2 NAME						
STREET ADDRESS		SPI BLVD., #503		2.3 STF	aeet ad	DDRESS				
CITY-ST-ZIP	MIAMI BEA	CH FL			TY-ST-	- ZIP	eridete			
TITLE			☐ DELETE	3.1 TiT				L Change	Addition	
NAME	ļ			3.2 NAI						
STREET ADDRESS						DDRESS			ļ	
CITY+ST-ZIP	ļ		Destre		IY-ST-	ZIP		<u> </u>	T A delice	
TITLE			☐ DETELE	4.1 1111		l		L Change	☐ Addition	
NAME OVERTE ADDRESS				4. 2 NA		20000			1	
STREET ADDRESS				- F		DDRESS			ľ	
CITY-ST-ZIP	☐ DELETE			4.4 CITY-ST-ZIP 5.1 TITLE			Change	Addition		
TITLE			ן וענינונ					ட் படி	- Addition	
NAME CTODEY ADDRESS				5.2 NAI		annree	•			
STREET ADDRESS						DDRESS			}	
CITY-ST-ZIP TITLE	<del></del>		DELETE 61 TI		Y-\$1-;	ZIP		Change	Addition	
NAME		* *	had Pereit	6.2 NA						
STREET ADDRESS				6.3 STR		nngess				
CITY-ST-ZIP				6.4 CIT		- 1				
<del> </del>	certify that the in	formation supplied with	this filing does not qualify t				Section 119.07(3)(i), Florida Statutes. I further ce	tify that th	e information	
indicated officer or i	on this annual r director of the c	oport or supplemental a	annual report is true and ac-	curate and	that	my signature	e shall have the same legal effect as if made und ired by Chapter 607, Florida Statutes; and that n	der oath; ti	hatiam an	