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

Mar 14 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # 361713 (1)LEX CORP., CO-OP. Principal Place of Business Mailing Address 501 79TH STREET 501 79TH STREET MIAMI BEACH FL 33141 MIAMI BEACH FL 33141-1964 3. Date incorporated or Qualified 3a. Date of Last Report 03/27/1970 04/18/1996 2. Principal Place of Business 2a. Mailing Address 4. EEI Number Applied For 59-1289029 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Ζıp Country 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No

10. Name and Address of New Registered Agent 25 29 30 9. Name and Address of Current Registered Agent 81 CUEVA, JULIAN CARLOS MACEDO 501 79TH STREET #1 Street Address (P.O. Box Number is Not Acceptable) MIAMI BEACH FL 33141 8870-3 SW 40th ST City Zip Code MIAMI 33165 nctions 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered on his state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered cliebt obligations of Section 607.0505, Florida Statutes. 11. Pursuant to the provisions of office or registered agent or agent. I am familiar with, and LARIOS 1 NCED O SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. SD DILETE Change Addition TITLE 1.1 1111.0 ALVAREZ, MARIA E. 1.2 NAME NAME CR2E034 501 79TH ST., APT.2 STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL CITY-ST-ZIP 1.4 CITY - \$1 - 7IP DELETE Addition TITLE 2.1 III.E Change CUEVA, JULIAN NAME 2.2 NAME 501 79TH STREET #1 STREET ADDRESS 2.3 STREET ADDRESS MIAMI BEACH FL CITY-ST-ZIP 2 4 CITY-ST-7IP DELFIE Change Addition TITLE ۷Ď 3.1.1016 ALVAREZ, FERMIN NAME 3.2 NAME 501 79TH ST., APT.4 STREET ADDRESS 3.3 STREET ADDRESS MIAMI BEACH FL CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Addition Change TITLE 4.1 THE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7/P 4.4 CHY - S1 - 7JP DELETE Change Addition TITLE 5.1 TITCE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 7/F DELETE Change Addition TITLE 6 1 TITLE

14. I do 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 of 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.

SIGNATURE:

3. 26 97 - 305 - 865 - 35 N

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

6.2 NAME

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED