## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

## **FILED** Sep 03 1997 8:00am Secretary of State

Principal Place of E 4227 W 16TH AVE HIALEAH FL 33012 US		Mailing Address 6241 NW 110TH ST HIALEAH FL 33012			DO NOT WRITE  3. Date Incorporated or Qualified  03/22/1973  4. FEI Number	IN THIS SPACE  3a. Date of Last  06/07/199	t Report
21		26			59-1470414	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State <b>28</b>		Election Campaign Financing     Trust Fund Contribution		00 May Be ed to Fees	
Zip 24	Country 25	Zip 29	30 Cou	ntry	8. This corporation owes or has pail Personal Property Tax due June	30. 🔀 Yes 🔲 No	
	Name and Address of Curren	t Registered Agent			10. Name and Address of New Reg	platered Agent	
REGALADO, IRVING R. 6241 NW 110 ST HIALEAH FL 33012			81 Name 82 Street Add 83	ress (P.O. Box Number is Not Acceptable)			
			-	84 City		FL 85 Zi	ip Code
office or registe agent. I am fan	ered agent, or both, in the State niliar with, and accept the obliga ure, typed or printed name of registered agen OFFICERS AND	of Florida, Such change was ations of, Section 607.0505, I of and less if applicable (No.	s authorized Florida Stati	i hy the cornora	poration submits this statement for the pr tion's board of directors. I hereby accept red when reinstaling)  ADDITIONS/CHANGES TO OFFIC	of the appointment a	as registered ORS IN 12
NAME RI STREET ADDRESS 66	EGALADO, IRVING R. 241 N W 110 STREET IALEAH, FL 00000	LJ DELETE	1.1 N 1.2 N 1.3 S	TE ET ADDRESS - ST - ZIP		Change	A Notion 2
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	2.1 2.2 2.3 2.4	E SEI ADDRESS		Chango	e Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETÉ	3.1	1 ADDRESS		☐ Chang	e Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ DÉLETE	4	1 ADDRESS		Change	e Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	6 6 6	ET ADDRESS ST-ZIP		Change	
	tify that the information supplied	with this filing does not qua	lify for	emption state	d in Section 119.07(3)(i), Florida Statutes	s. I further certify th	nat the

Information indicated on this annual report or supplier I am an officer or director of the corporation or fine rec appears in Block 12 or Block 13 if challed, quon an

urate and that my signature shall have the same legal effect as if made under oath; that cute this report as required by Chapter 607, Florida Statutes; and that my name