

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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 13 1997 8:00am
Secretary of State

DOCUMENT # 534941

(0)

1. Corporation Name
VE NE EMBARQUES, INC.

Principal Place of Business:

**2550 NW 72ND AVENUE
107
MIAMI FL 33122
US**

Mailing Address:

**P.O. BOX 521127
MIAMI FL 33152-1127**



2. Principal Place of Business:

21 State, Apt. #, etc

22 City & State

23 Zip Country

24

2a. Mailing Address:

26 State, Apt. #, etc

27 City & State

28 Zip Country

29 30

8. Name and Address of Current Registered Agent

**RODRIGUEZ, MIGUEL A
1251 WILSHIRE CIR E
PEMBROKE PINES FL 33027**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

3. Date Incorporated or Qualified
04/26/1977

3a. Date of Last Report
04/30/1996

4. FID Number
59-1770849

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. Yes No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0402 and 607.0403, 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the corporation, which is a corporation, or its authorized officer.

Signature of the person who is the registered agent.

DATE

12. OFFICERS AND DIRECTORS

- 11 TITLE DELETE
- NAME **VD**
- STREET ADDRESS **RODRIGUEZ, MIGUEL A.**
- CITY- ST- ZIP **1251 WILSHIRE CIR.**
- PEMBROKE PINES FL 33027**
- 12 TITLE DELETE
- NAME **PTSD**
- STREET ADDRESS **RODRIGUEZ, ANABELLE**
- CITY- ST- ZIP **15331 S.W. 143 ST.**
- MIAMI FL 33196**
- 13 TITLE DELETE
- NAME
- STREET ADDRESS
- CITY- ST- ZIP
- 14 TITLE DELETE
- NAME
- STREET ADDRESS
- CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

- 11 TITLE Change Addition
- 12 NAME
- 13 STREET ADDRESS
- 14 CITY- ST- ZIP Change Addition
- 21 TITLE
- 22 NAME
- 23 STREET ADDRESS
- 24 CITY- ST- ZIP Change Addition
- 31 TITLE Change Addition
- 32 NAME
- 33 STREET ADDRESS
- 34 CITY- ST- ZIP Change Addition
- 41 TITLE
- 42 NAME
- 43 STREET ADDRESS
- 44 CITY- ST- ZIP Change Addition
- 51 TITLE Change Addition
- 52 NAME
- 53 STREET ADDRESS
- 54 CITY- ST- ZIP Change Addition
- 61 TITLE
- 62 NAME
- 63 STREET ADDRESS
- 64 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exception stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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 liquidator empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE

[Signature]

Miguel Rodriguez

CR2E034 (0/96)