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.)

CORI ANNU	PROFIT PORATION AL REPORT 1997	FLORIDA DEPART Sandra B. Secretary DIVISION OF CO	Mortham of State	FILED 97 AUG -4 PH 12: 05
DOCUN 1. Corporation NANCOL		(1)		SECRETARY OF STATE TALLAHASSEE, FLORIDA
Principal Place of Business Mailing Address  2760 W 3RD AVE HIALEAH FL 33010  Mailing Address  2760 W 3RD AVE HIALEAH FL 33010				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 3a. Date of Last Report
<u> </u>	ace of Business	2a. Mailing Address		04/21/1981 05/01/1996 Applied For So-2085460 Not Applicable
21 Sulte, Apt. <del>1</del> 22	, elc.	Suite, Apt. #, etc.		59-2085460 Not Applicable  5. Certificate of Status Desired See Required  See Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip 24	Country 25 9. Name and Address of Curren		Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
MONTERO, NANCY B 2760 W 3RD AVENUE HIALEAH FL 33010  81 Name 82 Street Add 83 84 City  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named cor				ess (P.O. Box Number is Not Acceptable)  FL 85 Zip Code
office or registered agont, 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE				
12. TITLE	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME STREET ADDRESS CITY-ST-ZIP	MONTERO, BRYAN 13994 SW 18 TERR MIAMI FL	_ butter	1.2 NAME 1.3 STREET ADDRESS 1.4 City-St-Zip	7000022609971 -08/07/9701100001 ****165.00
TITLE NAME STREET ADORESS	VD MONTERO, NANCY B 13994 SW 18 TERRACE MIAMI FL	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	THE Traing で中国 Worldition
CITY-ST-ZIP TITLE NAME STREET ADDRESS OUT ST. ZIP	MIAMI IC	☐ DELETE	2.4 GITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS		□ DELETE	4.1 TILE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-S1-ZIP	Change Addition
TOTY-ST-ZIP TOTLE NAME STREET ADDRESS		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 City-St-Zip	Change Addition
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 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.				

To: Division of Corporations

From Marcol lic.

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Thank you many moter -