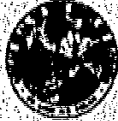


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Zandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J27503 (8)

1. Corporation Name
CABRERA-REYES CORP.

**APPROVED
AND
FILED**

95 MAY -1 AM 11:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business CABRERA-REYES CORPORATION 801 NORTHWEST 17 STREET, SUITE P MIAMI FL 33136 US	Mailing Address CABRERA-REYES CORPORATION 801 NORTHWEST 17 STREET, SUITE P MIAMI FL 33136 US
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DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 08/06/1986	3a. Date of Last Report 08/15/1994
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2745688	Applied For Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
		7. This corporation has liability for intangible tax under S. 199.022, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent MORALES, MIRNA 8841 NORTHWEST 46 COURT LAUDERHILL FL 33351	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 *Mirna Morales* **MIRNA MORALES** **PRESIDENT** **4-27-95**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PTD	NAME MORALES, MIRNA	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 8841 NORTHWEST 46 COURT	CITY - ST - ZIP LAUDERHILL FL	1.2 NAME	
		1.3 STREET ADDRESS	
		1.4 CITY - ST - ZIP	
TITLE VP	NAME CABRERA, MAURO J.	2.1 TITLE VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 335 NW 128TH AVENUE	CITY - ST - ZIP MIAMI FL	2.2 NAME MORALES, CARLOS	
		2.3 STREET ADDRESS 8841 NW 46 CT.	
		2.4 CITY - ST - ZIP LAUDERHILL, FL 33351	
TITLE SVD	NAME MORALES, CARLOS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 8841 NORTHWEST 17 STREET	CITY - ST - ZIP LAUDERHILL FL	3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY - ST - ZIP	
TITLE T	NAME REYES, DAHLIA M.	4.1 TITLE T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 5301 HAWKS BLUFF AVENUE	CITY - ST - ZIP DAVE FL	4.2 NAME MORALES, MIRNA	
		4.3 STREET ADDRESS 8841 NW 46 CT	
		4.4 CITY - ST - ZIP LAUDERHILL, FL 33351	
TITLE	NAME	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		5.2 NAME	
CITY - ST - ZIP		5.3 STREET ADDRESS	
		5.4 CITY - ST - ZIP	
TITLE	NAME	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		6.2 NAME	
CITY - ST - ZIP		6.3 STREET ADDRESS	
		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 addition.

SIGNATURE: *Mirna Morales* **MIRNA MORALES** **4/27/95** **547-2274**
Signature and typed or printed name of signing officer or director Date