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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L59678

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FILED Apr 10 1997 8:00am Secretary of State

Principal Place of Business * JAIME GONZALEZ 740 BLUEBIRD LANE PLANTATION FL 33324 US		Mailing Address % JAIME GONZALE 740 BLUEBIRD PLANTATION FL 33 US		3. Date Incorporated or Qualified 3a. Date of Last Report				
					03/23/1990		/30/1996	ieport .
Principal F	Place of Business	2a. Mailing Addres	ss		4. FEI Number 65-0179160		J	oplied For
Suite, Apt	I # etc.	26 Suite, Apt. #, e	ola.					ot Applicable Additional
,	'	27			5. Certificate of Status Desired		7	equired
City & Sta	ate	Crty & State	·····		6. Election Campaign Financing		\$5.00	May Be
Z	Country	28		ountry	Trust Fund Contribution	<u> </u>		to Fees
Zφ	25	29	30	ountry	This corporation has liability for Florida Statutes	r intangible □ Yes 1		s. 199 .032,
	9. Name and Address of C		[30]		10. Name and Address of New F			
	NZALEZ, JAIME			81 Name		···		
	O BLUEBIRD LANE			82 Street Ad	ddress (P.O. Box Number is Not Accepta	able)		
PLA	ANTATION FL 33324			83				
				83	* • b			
				84 City		Ei	85 Zip	Code
		State of Florida Such chang- obligations of Section 607.05	e was authori 505, Florida S	zed by the corpo tatutes.	orporation submits this statement for the reation's board of directors. I hereby acc	ept the app	pointment as	registered
	Signature, typical or printed name of registe			ered Agent signature re	quied when reinstating) ADDITIONS/CHANGES TO OFF	DATE		
ENATURE E	Signature, systed or printed name of registropic FI	red agent and tile if applicable	(NOTE Regist	ered Agent signature re 3.	quired when reinstating)	DATE		RS IN 12
ENATURE F	Signature, speed or printed name of register OFFICER D GONZALEZ, JAIME	red agent and tile if applicable	(NOTE Registres) 1: ETE 1.	ered Agent signature re 3. 1 TITLE 2 NAME	quired when reinstating)	DATE	D DIRECTOR	RS IN 12
ET ADDRESS	Signature, 153-ed or printed name of register OFF ICER D GONZALEZ, JAIME 740 BLUEBIRD LANE	red agent and tile if applicable	(NOTE Registre 1: 14: 14: 15: 15: 15: 15: 15: 15: 15: 15: 15: 15	ered Agent signature re 3. 1 TITLE 2 NAME 3 STREET ADDRESS	quired when reinstating)	DATE	D DIRECTOR	RS IN 12
SNATURE E E E 4 ADDRESS - ST-21F	Signature, speed or printed name of register OFFICER D GONZALEZ, JAIME	red agent and tile if applicable	(NOTE Repist 1: ETE 1. 1.2 1.3	ered Agent signature re 3. 1 TITLE 2 NAME	quired when reinstating)	DATE	D DIRECTOR	RS IN 12
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