SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

M35830

(2)

L. VIDAL, INC.					 10611611 1861 1888 86161 1888 1861		DATA DIBILONIA DINA MBA	
Principal Place of Business Mailing Address								
13360 N.W. 7TH AVE. 13360 N.W. 7TH AVE. NORTH MIAMI FL 33168				8				
						 Date Incorporated or Qualified 07/28/1986 		ate of Last Report /15/1995
2. Principal Place of B	usiness	<u>}</u>	ling Address			4. FEI Number 59-2715151		Applied For Not Applicable
Suite, Apt. #, etc		26 Suit	te. Apt. #, etc		.			\$8.75 Additional
22		27	(A), 71pt: 11, 000			5. Certificate of Status Desired		Fee Required
City & State			/ & State			6. Election Campaign Financing		\$5.00 May Be
23		28				Trust Fund Contribution	L_I	Added to Fees
Zip	Country	Zip		Coun	try	8. This corporation has hability to		7
24	25	29		30		Florida Statutes	Yes L	J No
9. Na	me and Address of	Current Registered	d Agent			10. Name and Address of New F	legistered	Agent
LEYTE-VIDA	AL, JOSE'				11 Name			
611 SW 87			1	Street Add	ress (P.O. Box Number is Not Accepta	able)		
MIAMI FL 3	33174			ļ.	13			
				"	13			
				1	14 City		FL	85 Zip Code
44 Days and to the nu	a livera of Continue C	07 0500 and 607 16	O9 Florida Ctot	uton the obe		poration submits this statement for the		har ains its resistered
	agent or both, in the	e State of Florida, St	uch change was	s aumorized p	oy the corporati	on's board of directors. Thereby acce	рсте аррс	nument as registered
agent. I am familia SIGNATURE		obligations of, Sec	ction 6 07.0505, F	Florida Statut	es			
agent. I am familia SIGNATURE Signature i	typed or printed name of regis	obligations of, Sec tend agest and tilk if appl	ction 6 07.0505, f	Florida Statut	es	red when reinstatings	LAH	DIRECTORS IN 12
agent. I am familia SIGNATURE Signature i 12.	typed or printed name of regis	obligations of, Sec	ction 6 07.0505, f	Florida Statut	es Agent agostore requ	icd when reinstaings ADDITIONS/CHANGES TO OFF		
agent. I am familia SIGNATURE Signature i 12. TITLE DPS	typed or printed name of regis OFFICE	obligations of, Sec tend agest and tilk if appl	cable (N	Florida Statut Off Registered a	es Agent signarine renpi			
agent, I am familia SIGNATURE Signature 1 12. TITLE DPS NAME LEYT	ypod or prailed name of regis OFFICE	obligations of, Sec tend agest and tilk if appl	cable (N	Florida Statut Off Registered 13. 11 lift 12 NAM	es Agent signarine renpi			
agent, I am familia SIGNATURE Signature 1 12. TITLE DPS NAME LEYT	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	cable (N	Florida Statut Florida Statut Talenta in the statut in t	es Agent signatione requ E			
agent. I am familia SIGNATURE SIGNATURE 12. TITLE DPS NAME LEYT STREET ADDRESS 611 : CITY-S1-ZIP MIAM	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	cable (N	Florida Statut Florida Statut Talenta in the statut in t	Sgent signsyone rocka E E E E E F F F F F F F F			Change Additio
agent, I am familia SIGNATURE 12. TITLE DPS NAME LEYT STREET ADDRESS 611	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	stion 607.Ō505, F	Florida Statut Florida Statut 13. 11 lift 12 NAN 13 STR 14 CITY	E FELL ADDRESS E ST-21P E			Change Additio
agent, I am familia SIGNATURE SIGNATURE DPS NAME LEYT STREET ADDRESS GITY-ST-ZIP NAME MIAN	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	stion 607.Ō505, f Sable (h RS DELETE	Florida Statut Off Registered 13. 11 Tift 12 NAN 13 STR 14 CITY 23 TIFL 22 NAN	E FELL ADDRESS E ST-21P E			Change Additio
agent, I am familia SIGNATURE SIGNATURE 12. TITLE DPS NAME LEYT STREET ADDRESS 611: CITY-ST-ZIP MIAN	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	stion 607.0505. F	Florida Statut 13. 11 lift 12 NAN 13 STR 14 GIT 23 TITL 22 NAN 23 STR 24 GIT	E FEL ADDRESS F. STZIP E FEL ADDRESS F. STZIP F. F. STZIP F. STZIP			Change Addition
agent. I am familia SIGNATURE 12. TITLE DPS NAME LEYT STREET ADDRESS 611: CITY-S1-ZIP MIAN TITLE NAME STREET ADDRESS CITY-S1-ZIP CITY-S1-ZIP CITY-S1-ZIP MIAN TITLE NAME STREET ADDRESS CITY-S1-ZIP	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	stion 607.Ō505, f Sable (h RS DELETE	Florida Statut 13. 11 lift 12 NAN 13 STR 14 CITY 23 TITE 22 NAN 23 STR 24 CIT 31 TITE	E SELFADORESS F. ST ZIP EEL ADDRESS F. ST ZIP EEL ADDRESS F. ST ZIP EEL ADDRESS F. ST ZIP E			Change Additio
agent. I am familia SIGNATURE Signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	stion 607.0505. F	Florida Statut 13. 11 lift 12 NAN 13 STH 14 CID 23 TITL 22 NAN 23 STR 24 CIT 31 TITL 32 NAN	E SELF ADDRESS SEL			Change Additio
agent. I am familia SIGNATURE Signature 12. TITLE DPS NAME STREET ADDRESS 611 MIAN TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	stion 607.0505. F	### TIPE TO GO STATUTE 13. 11 TIPE 12 NAN 13 STH 14 CITY 23 TIPE 24 CIT 31 TIPE 32 NAN 33 STR	E EEL ADDRESS EY-ST-ZIP E EEL ADDRESS EY-ST-ZIP E EEL ADDRESS EY-ST-ZIP E EEL ADDRESS			Change Additio
agent. I am familia SIGNATURE Signature 1 12. TITLE DPS LEYT STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP CITY-S1-ZIP CITY-S1-ZIP CITY-S1-ZIP	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	tion 607.0505. F	Florida Statut 13. 11 lift 12 NAN 13 STH 14 CID 23 TITL 22 NAN 23 STR 24 CIT 31 TITL 32 NAN 33 STR	E SELF ADDRESS Y ST - ZIP			Change Additio
agent. I am familia SIGNATURE SIGNATURE 12. TITLE DPS NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	stion 607.0505. F	### PROFESSION OF THE PROFESSI	E SELF ADDRESS Y-ST-ZIP E SELF ADDRESS Y-ST-ZIP E SELF ADDRESS Y-ST-ZIP E SELF ADDRESS SELF ADDR			Change Additio
agent. I am familia SIGNATURE SIGNATURE 12. TITLE DPS NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	tion 607.0505. F	### TIPE TOTAL	E EEL ADDRESS Y ST ZIP E EL E			Change Additio
Agent. I am familia SIGNATURE SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	tion 607.0505. F	### TOTAL STATUTE 13. 11 THE 12 NAN 13 STA 14 CITY 23 THE 22 NAN 23 STA 23 STA 31 THE 32 NAN 33 STA 34 CIT 41 THE 42 NAN 43 STA	E EEL ADDRESS Y-SI-ZIP E			Change Additio
agent. I am familia SIGNATURE SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	Stion 607.0505. F	### TOTAL STATUTE 13. 11 THE 12 NAN 13 STA 14 CITY 23 THE 24 CITY 31 THE 32 NAN 33 STA 34 CITY 41 THE 42 NAN 43 STATUTE 44 CITY 44 CITY 44 CITY 45 NAN 46 CITY 44 CITY 44 CITY 44 CITY 44 CITY 44 CITY 45 CITY 46 CITY 47 NAN 47 STATUTE 48 NAN 48 STATUTE 48 STATU	E EEL ADDRESS Y-SI-ZIP E EEL ADDRESS			Change Additio
agent. I am familia SIGNATURE SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	tion 607.0505. F	### TOTAL STATUTE 13. 11 THE 12 NAN 13 STR 14 CITY 23 THE 22 NAN 23 STR 24 CIT 31 THE 32 NAN 33 STR 34 CIT 41 THE 42 NAN 43 STR 44 CITY 51 THE	E E E E E E E E E E E E E			Change Additio
Agent. I am familia SIGNATURE SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	Stion 607.0505. F	Torica Statut 13. 11 IIIf 12 NAN 13 STR 14 CIT 22 NAN 23 STR 24 CIT 31 TITE 32 NAN 33 STR 44 CIT 41 TITE 42 NAI 43 STR 44 CIT 51 TITE 52 NAN	E E E E E E E E E E E E E E E E E E E			Change Additio
AGONT. I AM FAMILIA SIGNATURE SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	Stion 607.0505. F	### TOTAL STATUTE 13. 11 11 15 12 NAM 13 STM 14 GTY 23 TITL 22 NAM 23 STM 24 CTY 31 TITL 32 NAM 33 STM 44 CTY 41 TITL 42 NAM 43 STM 44 CTY 51 TITL 52 NAM 53 STM	E E E E E E E E E E E E E			Change Addition Change Addition Change Addition Change Addition
Agent. I am familia SIGNATURE SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	Stion 607.0505. F	### TOTAL STATUTE 13. 11 11 15 12 NAM 13 STM 14 GTY 23 TITL 22 NAM 23 STM 24 CTY 31 TITL 32 NAM 33 STM 44 CTY 41 TITL 42 NAM 43 STM 44 CTY 51 TITL 52 NAM 53 STM	E EEL ADDRESS Y-SI-ZIP			Change Addition Change Addition Change Addition Change Addition
AGONT. I AM FAMILIA SIGNATURE SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	DELETE DELETE DELETE DELETE	### TOTAL STATUTE 13. 11 11/16 12 NAN 13 STR 14 CITY 23 TITL 22 NAN 23 STR 24 CITY 31 TITL 32 NAN 33 STR 44 CITY 41 TITL 42 NAN 43 STR 44 CITY 51 TITL 52 NAR 53 STR 53 STR	E E E E E E E E E E E E E			Change Addition Change Addition Change Addition Change Addition Change Addition
AGONT. I am familia SIGNATURE 12. TITLE DPS NAME LEYT STREET ADDRESS 611 : MIAN TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE TITLE	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	DELETE DELETE DELETE DELETE	### TOTAL STATUTE 13. 11 THE 12 NAM 13 STR 14 GTP 23 THE 22 NAM 23 STR 24 CTP 31 THE 32 NAM 33 STR 34 CTP 41 THE 42 NAM 43 STR 44 CTP 51 THE 52 NAM 53 STR 54 CTP 61 THE 62 NAM	E E E E E E E E E E E E E			Change Addition Change Addition Change Addition Change Addition Change Addition
AGONT. I am familia SIGNATURE 12. TITLE DPS NAME LEYT STREET ADDRESS 611: MIAN TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICE CE-VIDAL, JOSE ¹ SW 87 CT	obligations of, Sec tend agest and tilk if appl	DELETE DELETE DELETE DELETE	Torica Statut 13. 11 IIII 12 NAM 13 STR 14 GTV 23 TITL 22 NAM 23 STR 24 CTV 31 TITL 32 NAM 33 STR 34 CTV 41 TITL 42 NAM 43 STR 44 CTV 51 TITL 52 NAM 53 STR 54 C-TV 61 TITL 62 NAM	E E E E E E E E E E E E E			Change Addition Change Addition Change Addition Change Addition Change Addition

SIGNATURE: TOSE ALEXTE-VIDDL SIGNING OFFICER OR DIRECTOR

8/3/96 305)685.8954