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



FILED

Sandra B. Mortham

PROFIT CORPORATION ANNUAL REPORT 1997		Sandra I Socreta	RTMENT OF STATE B. Mortham ary of State CORPORATIONS	Apr 24 1997 8:00am Secretary of State	
1. Corporatio	MENT # M4303! CORPORATION	5 (8)			
Principal Plac % BLANCA AR 2151 SW 69TH MIAMI FL 3312 US	GUELLES CT.	Mailing Address * BLANCA ARGUELLES 2151 SW 88TH CT. MIAMI FL 33165-8240 US		3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal P 21 Suite, Apt.	lace of Business	2a. Mailing Address 26 Suite, Apt. #, etc.		12/11/1986 4. FEI Number 65-0068848 5. Certificate of Status Desired	04/16/1996
City & State 23 Zip	e Country	27 City & State 28 Zip	Country	Election Campaign Financing Trust Fund Contribution B. This corporation has liability for in	\$5.00 May Be Added to Fecs
24] BLA	25 9. Name and Address of Currer NCA ARGUELLES	29	81 Name		Yes No
2151	NW 57TH AVENUE, #484 I SW 89TH COURT MI FL 33165		B2 Street Addr	ress (P.O. Box Number is Not Acceptable 2151) SW 89TH COURT	85 Zin Code
11. Pursuant office or ragent. I a	m familiar with, and accept the oblig	ations of Section 607.0505, Fi	les, the above-named corp authorized by the corporal lorida Stajutes.	MIAMT poration submits this statement for the pution's board of directors. I hereby accep	1/16/97
40	Signature, typod or printed name of registered ago	rut end title uppkeable (NO ID DIRECTORS	Fregistered Agent signature requir	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE 7 7
12.	OF THE MIN	DELETE	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12 Change Addition
NAME STREET ADDRESS	GIOVANAZZI, CRISTINA G. OFC23-A AV FCO CARACAS, VENEZUELA		1.2 NAME 1.3 STREET ADDRESS		C Change
CHY-ST-ZIP TITLE NAME STREET ADDRESS	ONTO AND TENEZUEEN	☐ DELETE	1.4 CITY-ST-ZIP 21 TITLE 22 NAME 2.3 STREET ADDRESS		· Change Addition
CITY-ST-ZIP TITLE NAME		☐ DELFTE	2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME		☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE	•	DELETE	3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME		Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE		DELETE	4.2 RAWEL 4.3 STREEL ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME STREET ADORESS CITY-ST-ZIP			5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS		DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS		Change Addition

64 CITY-ST-ZIP

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 eath; 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.