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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	AL REPORT 996	/	ry of State CORPORATIONS		
DOCUM 1. Corporation I	MENT # P9200	00007532 (4)			
	AL ENTERPRISES, INC.				
14/4111111	AL ENTERN MOCO, INC.				
Principal Place of	of Business	Mailing Address		1 100111001 110 01101 01011	00111
1331 WASHING	GTON AVE	1331 WASHINGTON AVI			
MIAMI BEACH US	FL 33139	33139 BEACH FL 33139 US	1		
03				3. Date Incorporated or Qualified 11/24/1992	3a. Date of Last Report 01/31/1995
2. Principal Place	ce of Business	28. Mailing Address 26		4. FEI Number 65-0373024	Applied For Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	SB.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5 00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
24	25 9. Name and Address of Curi	29 rent Registered Agent	30	10. Name and Address of New R	
	5. Hame and Address of Con-		81 Name		
TORRES,	. G. S.		82 Street Add	dress (P.O. Box Number is Not Acceptab	le)
	1 STREET #4				
MIAMI BE	EACH FL 33139		83		ļ
					85 Zip Code
İ			84 City		
44.0	An experience of Sections 607.06	502 and 602 1508 Florida Statute	1 1 '	oration submits this statement for the pur	FL 1 1
11. Pursuant to or registere	o the provisions of Sections 607.05 ed agent, or both, in the State of D	502 and 607.1508, Florida Statute	1 1 '	oration submits this statement for the pur and of directors. I hereby accept the appr	FL 1 1
		502 and 607.1508. Florida Statute Krida. Such change was authorize ection 607.0505, Florida Statutes	es, the above named corpo ed by the corporation's box	cration submits this statement for the pur and of directors. I hereby accept the appr	FL 1 1
SIGNATURE S	Signature typed in Digital name of registered as	gent and title if applicable (NO	es, the above named corporation's box	rec when reinstating?	pose of changing its registered office ointment as registered agent. I am
SIGNATURE 12.	Signature typed Total name of registered a OFFICERS	gent and little if appreciable the two	es, the above named corporation's box Torres 1E: Registered Agent signature require 13.	1/24	pose of changing its registered office pose of changing its registered agent. I am 46 [MIE] [CERS AND DIRECTORS IN 12
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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 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 1/30/96

(305) 532 - 6700 Daytime Phone #