## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION ANNUAL REPORT** 

1997

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是是一个人,我们就是一个人,他们也是一个人,他们也是一个人,他们也是一个人,他们也是一个人,他们也是一个人,他们也是一个人,他们也是一个人,他们也是一个人,他们也



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

**DOCUMENT** # P92000008265 (0)

MIAMI WAREHOUSE CORPORATION

Principal Place of Business

2125 W OKEECHOBEE ROAD HIALEAH FL 33012

Mailing Address

2125 W OKEECHOBEE ROAD HIALEAH FL 33012

APPROVEL AND FILFO

97 DEC 26 MM 10: 46

SECRETARY OF STATE TALLAHASSEE, FLORIDA



SALSHMEST CONTRACTOR		THREE THE GOOTE		DO NOT WRITE IN THIS SPACE		
					3. Date incorporated or Qualified	3a. Date of Last Report
					12/01/1992	01/13/1997
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21		[26]		65-0498136	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<u>}</u> 1		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		[27]				
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	28] Zip	Cou	ntrv	This corporation owes or has pail	
24	25	29	30	,	Personal Property Tax due June	
[24]	9. Name and Address of Cur				10. Name and Address of New Reg	
DEL REY, JORGE				81 Name		
	0 S.W. 82 CT.	•		82 Street Add	lress (P.O. Box Number is Not Acceptable	
MIAMI FL 33143				51 GET AUC	iress (F.O. Box Norriber is Not Acceptable	(6)
				83		
				84 City		85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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.						
agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE X KIDNA COL KUI						
	Signature, type d or printed name of gistures			Agent signature requ	ried when relistating) ADDITIONS/CHANGES TO OFFIC	DATE
12.	OH ICERS	AND DIRECTORS  DELETE	13.	T	ADDITIONS/CHANGES TO OFFIC	Change Addition
TITLE	DEL REY, JORGE		1.2 NA	Į.		El change El (Isakish
NAME STREET ADDRESS	2125 W OKEECHOBEE RO	)AD		HEET ADDRESS		
CITY-ST-ZIP	HIALEAH FL 33012			Y-\$1-ZIP		and the same and the same and
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CITY-ST-ZIP		DELETE	5.4 CI 6.1 1/1			Change Addition
NAME			6.2 N/			_ ,
STREET ADDRESS				REET ADORESS		
CITY-ST-ZIP				TY-\$1-ZIP		

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 logal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted 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.