

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY 19 PM 1:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000042314**
1. Corporation Name
JUAN VELIN ENTERPRISES, INC.

Principal Place of Business Mailing Address
**14651 S.W. 110 TERR.
MIAMI, FL 33186-6614**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **1993** 3a. Date of Last Report **1994**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 14651 SW 110 TERR.		26		65-0417750		Not Applicable	
Suite, Apt #, etc		Suite, Apt #, etc		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
23 MIAMI, FL 2		28					
Zip	Country	Zip	Country				
24 33186	25 U.S.A.	29	30				

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
Juan Velin 14651 SW 110 Terr. Miami, FL 33186				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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.

SIGNATURE _____ DATE _____

12. PRESIDENTS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
	JUAN VELIN		
STREET ADDRESS	14651 SW 110 TERR.	1.3 STREET ADDRESS	
CITY ST ZIP	MIAMI, FL 33186	1.4 CITY ST ZIP	
TITLE	NAME	2.1 TITLE	2.2 NAME
STREET ADDRESS		2.3 STREET ADDRESS	
CITY ST ZIP		2.4 CITY ST ZIP	
TITLE	NAME	3.1 TITLE	3.2 NAME
STREET ADDRESS		3.3 STREET ADDRESS	
CITY ST ZIP		3.4 CITY ST ZIP	
TITLE	NAME	4.1 TITLE	4.2 NAME
STREET ADDRESS		4.3 STREET ADDRESS	
CITY ST ZIP		4.4 CITY ST ZIP	
TITLE	NAME	5.1 TITLE	5.2 NAME
STREET ADDRESS		5.3 STREET ADDRESS	
CITY ST ZIP		5.4 CITY ST ZIP	
TITLE	NAME	6.1 TITLE	6.2 NAME
STREET ADDRESS		6.3 STREET ADDRESS	
CITY ST ZIP		6.4 CITY ST ZIP	

Change Addition
400001497844
-05/24/95--01028--010
*****225.00 ***225.00**

TIS, 5/19/95

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 this 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: Juan Velin **5-11-95 305-383-5851**
DATE: _____