

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000046591 (0)

1. Corporation Name
74 W. 30 STREET CORP.



Principal Place of Business
**2414 S.W. 8TH ST.
MIAMI FL 33135**

Mailing Address
**2414 S.W. 8TH ST.
MIAMI FL 33135**

3. Date Incorporated or Qualified 06/15/1995	3a. Date of Last Report
4. FEI Number APPLIED FOR	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

21. Principal Place of Business	2a. Mailing Address
22. State, Apt. #, etc.	26. State, Apt. #, etc.
23. City & State	27. City & State
24. Zip	28. Zip
25. Country	29. Country
30. Country	

9. Name and Address of Current Registered Agent

**ARAZOZA & COMAS, P.A.
101 MADEIRA AVE.
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81. Name Arazoza, Comas, de Torres & Fernandez-Fraga, P.A.
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code

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 _____
(Signature and printed name of registered agent) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2. NAME	P Manuel A. Grande
STREET ADDRESS		3. STREET ADDRESS	2720 SW 129th Ave
CITY-STATE-ZIP		4. CITY-STATE-ZIP	Miami, FL 33175
TITLE	<input type="checkbox"/> DELETE	5. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6. NAME	VP Elia Grande
STREET ADDRESS		7. STREET ADDRESS	2720 SW 129th Ave.
CITY-STATE-ZIP		8. CITY-STATE-ZIP	Miami, FL 33175
TITLE	<input type="checkbox"/> DELETE	9. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		10. NAME	S Carlos M. Grande
STREET ADDRESS		11. STREET ADDRESS	1037 Alfonso
CITY-STATE-ZIP		12. CITY-STATE-ZIP	Coral Gables, 33146
TITLE	<input type="checkbox"/> DELETE	13. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		14. NAME	T Frank Grande
STREET ADDRESS		15. STREET ADDRESS	2414 SW 8 St.
CITY-STATE-ZIP		16. CITY-STATE-ZIP	Miami, FL 33135
TITLE	<input type="checkbox"/> DELETE	17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	100001721751
CITY-STATE-ZIP		20. CITY-STATE-ZIP	-02/22/96--01088--002
TITLE	<input type="checkbox"/> DELETE	21. TITLE	***200.00
NAME		22. NAME	
STREET ADDRESS		23. STREET ADDRESS	
CITY-STATE-ZIP		24. CITY-STATE-ZIP	

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. But 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 (changes) or on an attachment with an address.

SIGNATURE: *Manuel A. Grande*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MANUEL A. GRANDE

01-18-96 305-642-4621
 Date of Filing Date of Phone #

CR2E034 (12/95)