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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000082586 (4)

## FILED Apr 16 1997 8:00am Secretary of State

Principal Place		Mailing Address		<del>,</del>				
1050 SE 5TH ST. BAY 04 HIALEAH FL 33010 HIALEAH FL 33010					3. Date Incorporated or Qualified 3a. Date of Last Report			
Ł. Principal Pl	lace of Business	2a. Mailing Address	<del></del>	· 	10/07/1996 4. FEI Number 65-069876	፲ 3		oplied For ot Applicable
Suite, Apt	#. etc.	Suite, Apt. #, etc.			Certificate of Status Desired			Additional
City & State	0	City & State			6. Election Campaign Financing		\$5.00	May Be
Zip	Country 25	Zip     Zip	Count	ry	Trust Fund Contribution     This corporation has liability for in Florida Statutes		Added to under s	
1	9. Name and Address of Current	<u></u>	1901		10. Name and Address of New Reg			
REY, LUIS 1050 SE 5TH ST. BAY 04 HIALEAH FL 33010				Name Street Addi City	ress (P.O. Box Number is Not Acceptable	. <u></u>	5 Zip (	Code
Purspant office or nagent it as	to the provisions of Sections 607.0502 egistered agent or both, in the State on farmiliar with, and accept the obligations based to produce agent	of Florida. Such change was tions of, Section 607.0505, Fl	authorized kirida Statut	by the corporal	coration submits this statement for the pution's board of directors. I hereby accepted when reinstating)	FL urpose of chat the appoint	inging it ment as	s registered registered
2.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE			
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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 path; 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 priangeout of a palachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/28/97 (308) 884-5334

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