

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.)

**APPROVED
AND
FILED**

①

1997 AUG 26 PM 12: 47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000092020 (2)
 1. Corporation Name
BEMAX, INC.

Principal Place of Business 14553 SW 142 COURT CIRCLE SOUTH MIAMI FL 33186	Mailing Address 14553 SW 142 COURT CIRCLE SOUTH MIAMI FL 33186
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/06/1996	3a. Date of Last Report N/A
21 14553 SW 142 CT. CIR. SO.	26 14553 SW 142 CT. CIR. SO.	4. FEI Number 65-0722702		Applied For Not Applicable	
22	27	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 MIAMI, FL	28 MIAMI, FL	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 33186	25 USA	29 33186	30 USA	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

ROCHA, JUAN C
14553 SW 142 COURT CIRCLE
SOUTH MIAMI FL 33186

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	14553 SW 142 CT. CIR. SO.
83	
84 City	MIAMI
85 State	FL
86 Zip Code	33186

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
 Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	JUAN C. ROCHA	
1.3 STREET ADDRESS	14553 SW 142 CT. CIR. SO.	
1.4 CITY-ST-ZIP	MIAMI, FL 33186	
2.1 TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	LESLIE E. ROCHA	
2.3 STREET ADDRESS	14553 SW 142 CT. CIR. SO.	
2.4 CITY-ST-ZIP	MIAMI, FL 33186	
3.1 TITLE	TREASURER	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	JUAN C. ROCHA	
3.3 STREET ADDRESS	14553 SW 142 CT. CIR. SO.	
3.4 CITY-ST-ZIP	MIAMI, FL 33186	
4.1 TITLE	SECRETARY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	LESLIE E. ROCHA	
4.3 STREET ADDRESS	14553 SW 142 CT. CIR. SO.	
4.4 CITY-ST-ZIP	MIAMI, FL 33186	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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-08/27/97-01111-004
*****165.00 ***165.00**
1/6/98
8/20/97

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 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]* (309)

CR2E034 (4/97)

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BEMAX, INC.

July 18, 1996

Annual Reports Filings
Division of Corporations
Post Office Box 1500
Tallahassee, Florida 32302-1500

To Whom It May Concern,

I am writing this letter in reference to the Profit Corporation Annual Report. This corporation did not receive a *1st notice*. This corporation received the *2nd notice* packet just yesterday, July 17th. We believe that the reason may be because our address, in your records has been placed incorrectly. This corporation is not located in South Miami, as your records state. The correct address as should be shown on an envelope must be:

14553 S.W. 142 Court Circle South (or may be abbreviated Ct.Cir.So.)
Miami, Florida 33186

The "*South*" must be placed together with "Court (Ct.) Circle(Cir.)" in order for all of our mail to arrive here. There is also the possibility that the *1st notice* may have gone to the property located at 14553 S.W. 142 Court Circle, and unfortunately they do not forward our mail to us.

I hope that you can make the correct changes to our address in order for us to receive our mail on time. Thank you for your time and attention.

Sincerely,



Juan Carlos Rocha
President