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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # M81770

(3)

<b>ARTHUR</b>	BAROSEL	A. INC.
ווטווות	DALIGGEL	A. 1110.

,								
Principal Place of Business Mailing Address								
9810 SW 74TH	US BLVD	9810 S.W. 74 ST Miami Fl 33173 US						
MIAMI FL 33173 US		US	08		3. Date Incorporated or Qualified 05/16/1988	3a. Date of Last 01/24/1		
2. Principal Plac	e of Business	2a. Mailing Address 26			4. FEI Number 65-0061181		Applied For Not Applicable	
Suite, Apt. #,	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 7	5 Additional Required	
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	1 1	00 May Be led to Fees	
Ζιρ 2 <b>4</b>	Country 25	Zip 29	Gount 30	ry	This corporation has liability for Florida Statutes	intangible tax unde:  No	s 199.032,	
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New F	legistered Agent		
			8	11 Name	,			
BAROSEI 9810 S.W	LA, ARTHUR 174 st.		8	2 Street Add	ress (P.O. Box Number is Not Acceptat	ole)		
MIAMI FL			Ē	3				
			6	4 City		FL 85	Zıp Code	
SIGNATURE _s	gnature, typno or printed name of registered agen	t and title if applicable INC	Th. Registered A	gent signature receive	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE	TORS IN 12	
THLE NAME STREET ADDRESS	D Barosela, Arthur 9810 S.W 74 St.	☐ DELETE	1. 1 TITI 1.2 NAM 1.3 STRI	ļ		Cnang	e 🔲 Addition	
C/TY - S7 - 7/5*	MIAMI FL	□ DELETE	1.4 City 2 1 Titl	- ST - 7/P		☐ Chang	e 📑 Addition	
NAME			2 2 NAM					
STREET ADDRESS				FET ADDRESS				
CHTY-ST-ZIP			2.4 City	7-ST-ZIP				
THE		DELETE	3. 1 TITI 3 2 NAM			☐ Chang	e 🔲 Addition	
NAME			1	REET ADDRESS				
STREET ADDRESS				r-ST-ZIP				
CITY-ST-ZIF		DELETE	4 1 117		A - A - A - A - A - A - A - A - A - A -	Chang	e 🔲 Addition	
NAME			4.2 NAN	#£				
STREET ADDRESS			4 3 STR	EET ADDRESS				
C!TY-S1-ZIP			4.4 CiT	(-SI-7IP				
11"LE		☐ DELETE	5 1 TH	LF		☐ Chang	e 🔲 Addition	
NAME			52 NAM	AE				
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP		for nevere		Y-ST-ZIP			In [7] Add line	
TITLE		DELETE	6 1 111			☐ Chang	e 🔲 Addition	
NAME			6.2 NAM					
STREET ADDRESS				EET ADDRESS				
CITY - ST - ZIP		with this flips is and retails from	6.4 CIT	Y-ST-ZIP	for the exemption stated in Section 119	107/31/k) Florida Cta	tutas I further	
certify that	the information indicated on this agr	nual report or supplemental and oration or the receiver or truste	nual report is se empowere	true and accur	ror the exemption state in the color in a rate and that my signature shall have the his report as required by Chapter 607, F	a same legal enect a	s ii made under	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-96 (305) 274-8272