FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400062154 (7)

THE FORTY EIGHTYFIVE CORPORATION

						3 18013401 180 1088 UIBI 8088 0848 E011					
Principal Place of Business Mailing Address							T TODISON THE TORK OFFIC BOTH COLD SOL	49 110 4 1110 1	1881 11881 EIRI	1 MINI 1801	
4085 NW 3RD MIAMI FL 3312		4085 NW 3RD ST MIAMI FL 33126-5725									
							Date Incorporated or Qualified 08/23/1994		te of Last R 2/1996	eport	
2. Principa P	lace of Business	2a. Mailing Address				4. FEI Number Applied For					
21		26				65-0547846 Not Appli			ot Applicable		
Suite Apt	#, etc.	Suite, Apt. #, etc.				5.	Certificate of Status Desired		\$8.75		
22		27			_	-			Fee Re		
City & State	\mathbf{e}	City & State				6. Election Campaign Financing \$5.00 May Be					
23 Zip	Country	28	T		 		Trust Fund Contribution		Added (
	Z _{ip}	Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No						
24	25 9. Name and Address of Currer	29 nt Registered Agent	30				Name and Address of New Reg				
CAD	RERA, NELSON	it tiografication right		81	Name	70.	Traine and Address of Hell Hell	1010100	Aour		
	5 NW 3RD ST		[
	MI FL 33128		8:			eet Address (P.O. Box Number is Not Acceptable)					
MPA	MI PL 33120		ŀ	83		*************	hattatti hariti ili anni de la compani de				
			Ł								
				84	City	• •		FL	85 Zip (Code	
office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both lin the State im familiar with, and accept the oblig	02 and 607.1508, Florida Statut e of Florida, Such change was lations of, Section 607.0505, Fl	tes, the ab authorized orida Stati	l by utes	a-named corp the corporati	oration ion's b	n submits this statement for the po poard of directors. I hereby accep	irpose of the appo	changing it pintment as	s registered registered	
SIGNATURE	Signaria: Typico or seans discover of registered age	cottano blic if applicable (NO)	IE Registered	Age	ent signature require	ed when	reinstating)	DATE			
12.	OFFICERS AN	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
TITLE	D DELETE			1.1 TITLE					Change	Addition	
NAM [®]	CABRERA, NELSON		1.2 NA						•		
STREEL ADDRESS 4085 NW 3RD ST			1.3 ST	1.3 STREET ADDRESS							
CITY - S1 - ZIP	MIAMI FL 33126		1.4 CITY-		T-ZIP						
TITLE	D CARDEDA CAMBRA I	L DELETE	2.1 TITLI						☐ Change	Addition	
NAMÉ	CABRERA, SANDRA I		2.2 NAM								
STREET ADDRESS	4085 NW 3RD ST		2.3 \$TI	REET	ADDRESS						
CITY - ST - 7IP	MIAMI FL 33126	DECET	2. 4 CI	******	ST - ZIP						
7111.6		☐ DELETE	3.1 1/1					4. T	Change	Addition	
NAVE STREET ADDRESS			3.2 NA		4000000						
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP TITLE		DELETE	3.4. CI 4.1 TIT		51 - ZIP		· · · · · · · · · · · · · · · · · · ·		Change	Addition	
NAME		L DECENE	4. 2 NA						LI VIRINGE	E Addition	
STREET ADDRESS					ADDRESS						
DITY-ST-ZIP			4.4 CIT				•				
TITLE		☐ DELETE	5.1 TH		1- CIT	·····			Change	Addition	
NAME			5.2 NA								
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP			5 4 CH								
THE		DELETE	6.1 TIT			***************************************	UTIN		Change	Addition	
NAME			62 NA								
STREET ADDRESS					ADDRESS		1				
	İ		1								

SANDRA I. CABRERA

FILED

Jan 29 1997 8:00am

Secretary of State

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