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 # M98381

(0)

AMBRO, INC.

Principal Place of Business

Mailing Address

10642 SW 75 LANE. MIAMI FL 33173

SIGNATURE:

10642 SW 75 LANE. MIAMI FL 33173-2944

FILED
May 02 1997 8:00am
Secretary of State



MIAMI PL 3317	3	MIAMI LF 22113-5844							
				3. Date incorporated or Qualified 09/07/1988	3a. Date of Last Report 05/01/1996				
	lace of Business	2a. Mailing Address	nc /	_	4, FEI Number		\rightarrow	Applied For	
21 / <i>0 6 4</i> Suite Apt	12 SW 75 Lane	26 /0642 SW Suite, Apt. #, etc.	75 La	ne	65-0266641			Not Applicable	
····	# Cit.		10.1.10		5. Certificate of Status Desired	×		Additional Required	
22 City & State		27 Miami, Florida City & State		6 Floring Compains Floring					
3 MIAM	/	28 33/73			6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country	Zip	Count	гу	8. This corporation has liability for			***************************************	
24 33/	73 25 USA	29	30 US	A		Yes [J. 100.00E,	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	glatered	Agent		
DOV	vell,marie elsie		В	1 Name					
14732 SW 108 TERR. MIAMI FL 33196			8	82 Street Address (P.O. Box Number is Not Acceptable)					
				Sireer Address (F.O. Box Number is Not Acceptable)					
			8	3					
			8	4 City			85 Zip	o Code	
				1 - 7		FL	.		
office or re	eastered agent, or both, in the State.	of Florina, Such change was	guthorized b	nu the cornor	rporation submits this statement for the pation's board of directors. I hereby accept	ourpose of	f changing	its registered	
agent Lar	m familiar with, and accept the obliga	ations of Section 607.0505, F	lorida Statut	es.	ation's board of directors. Frieldby accep	or marabb	Ollisinosti a	is reflictored	
SIGNATURE						-		•	
	Signature, typed or punted name of registered age			geni signature req	uired when reinstating)	uniE .	• • • • • • • • • • • • • • • • • • • •		
12.	OFFICERS AND		13.	······································	ADDITIONS/CHANGES TO OFFIC	ERS AND			
TITE!	D AMEDEC DICEDE EMILE	☐ DELETE	1.1 TITLE				Change	Addition	
NAME	AMEDEE, PIERRE EMILE		1.2 NAMI						
STREET ADORESS	10642 S.W. 75TH LN.		1.3 STRE	ET ADDRESS					
CHY-ST-ZIP	MIAMI FL	····	1.4 CITY						
TOTLE	D	☐ DELETE	2.1 TITLE	j			Change	Addition	
NAME	AMEDEE, JEAN BERNARD		2.2 NAM						
STHEET ADDRESS	10642 S.W. 75TH LN.		2.3 STRE	ET ADORESS					
CHY-ST-ZIP	MIAMI FL.		2. 4 CITY						
TITLE	D	☐ DELETE	3.1 TITLE		•	7.5	Change	Addition	
NAME	AMEDEE, EDWIGE		3.2 NAME						
STREET ADDRESS	10642 S.W. 75TH LN.		3.3 STRE	ET ADDRESS					
C!Tr-S-7IP	MIAMI FL		3.4. CITY						
TITLE		☐ DELETE	4.1 TITLE				L Change	Addition	
NAME			4. 2 NAM	ŧ					
STREET ADDRESS			4.3 STRE	ET ADDRESS					
011Y - S* - 7IP			4.4 CITY				1		
TI-[f		L_) DELETE	5.1 TITLE				Change	Addition	
NAME			5.2 NAME						
STREET ADDRESS			5.3 STRE	ET ADDRESS					
C-11 - S1 - 7iP			5.4 CITY		·				
1016		☐ DELETE	6.1 TITLE				Change	Addition	
NAME			6.2 NAME	:					
STREET ADDRESS			6.3 STRE	ET ADDRESS					
CITY-S1-ZIP		*****	6.4 CITY						
14. I do hereb	by certify that the information supplied in indicated on this appual regard or a	d with this filing does not qual	lify for the ex	cemption state	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega	s. I further	r certify the	at the	
l am an of	ficer or director of the corporation or	the receiver or trustee empor	wered to exe	cute this rep	ort as required by Chapter 607, Florida S	itatutes; a	nd that my	name	
appears r	n Block 12 or Block 13 if changed, or	on an attachment with an ac	aress.						