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May 09 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000003544 (0)

1. Corporation Name  
8-23 CORPORATION

Principal Place of Business  
10000 SW 56TH STREET STE. 32  
MIAMI FL 33165

Mailing Address  
10000 SW 56TH STREET STE. 32  
MIAMI FL 33165-7163



3. Date Incorporated or Qualified 01/13/1995  
3a. Date of Last Report 02/27/1996

21. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country	2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country	4. FEI Number NOT APPLICABLE Applied For Not Applicable	5. Certificate of Status Desired \$8.75 Additional Fee Required
22	26	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No
23	27	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No	
24	28		
25	29		
30			

9. Name and Address of Current Registered Agent

~~QUINTANA, J L ESO.~~  
~~2333 PONCE DE LEON BLVD. PH STE. 1120~~  
~~CORAL GABLES FL 33134~~

10. Name and Address of New Registered Agent

81 Name J. Luis Quintana  
82 Street Address (P.O. Box Number is Not Acceptable)  
338 MINORCA AVE  
83  
84 City CORAL GABLES FL 85 Zip Code 33134

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 of registered agent or director if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	RODRIGUEZ, R N	1.2 NAME	
STREET ADDRESS	10000 SW 56TH STREET STE. 32	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33165	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/97

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CR2E034 (9/96)