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 # 317336

MECHOSO STORE, INC.

Principal Place of Business

ORF. INC.

(6)

Mailing Address

FILED Mar 25 1997 8:00am Secretary of State



1672 SW 6 ST Miami Fl 33135		1672 SW 8 ST Miami Fl 33135-5220	1672 SW 8 ST MIAMI FL 33135-5220									
							3. Date Incorporated or Qualified 3a. Date of Last Repo 05/30/1967 03/18/1996]	
2. Principal Place of Business		2a. Mailing Address				4. FEI Number	-1		oplied For	ł		
21		26	<u> </u>		59-1165874			of Applicable	l			
Suite, Apt.	#, etc.	· · · · · · · · · · · · · · · · · · ·		Suite, Apt. #, etc.				\$		Additional	1	
22		27	27		5. Certificate of Status Desired	_ a		equired	l			
City & Stat	le		City & State	-			6. Election Campaign Financing				l	
23	23			28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip		Country	Zip	Co	untry		8. This corporation has liability for it		· · · · ·		l	
24	2	5	29	30			Florida Statutes Yes No					
g. Name and Address of Current Registered Agent				7		10. Name and Address of New Reg	<u>, – </u>		·	l		
JULI	JO B. MECH	080			81	Name		-			ĺ	
1601 S.W. 12 AVENUE					90 Constanting (D.O. O. All)						ı	
MIAI	MI FL			82 Street Add		Street Add	dress (P.O. Box Number is Not Acceptable	(e)			ĺ	
					83		7.4				ĺ	
					84	City		FL 85	Zip	Code	l	
11. Pursuant	to the provisio	ns of Sections 607	.0502 and 607.1508. Florida S	statutes the	l	e-named cor	poration submits this statement for the pr	irnose of cha	.]. naina it	e registered	ı	
office of r	registered ago	nt, or both, in the S	State of Florida. Such change (was authoriz	ed by	the corpora	ation's board of directors. I hereby accep	t the appointn	nent as	registered		
-	ari i arimar witi	i, and accept the c	obligations of, Section 607.050	5, Fiorida St	siules	3.				į	l	
SIGNATURE	Signature typed or	punied name of recisions	of agent and title if applicable	/NOTE Honister	ed Ane	ol s onalute teau	pled when to-instating)	DATE				
12.			AND DIRECTORS	13		an e griciore requ	ADDITIONS/CHANGES TO OFFICE		FOTOE	IS IN 12	í	
TITLE	D		DELETE		TITLE		1231101131013110131101		Change	Addition	9	
NAME	MECHOSO), OSCAR L		12	1,2 NAME						1	
STREET ADDRESS	6750 SW	ISTH ST				ADDRESS					8	
CITY-ST-ZIP	MIAMI, FL	00000				T- ZIP					Ļ	
TITLE	VD		DELETE			1 - ZIF			Change	Addition	Ę	
NAME	MECHOSO	, AMELIO E							Jiiu.igo		1	
STREET ADDRESS	611 SW 24TH RD			2.2 NAME 2.3 STREET ADDRESS						ı		
CITY-ST-ZIP	MIAMI, FL	–			CITY-S						ı	
TITLE	SD DELETE				ITLE	11-211			Change	Addition	į	
NAME	BAEZ, LAY	'DA						٠.	Pitarigo	Kudillon		
STREET ADDRESS	1145 SW 12TH ST			3.2 NAME 3.3 STREET ADDRESS								
CITY-ST-ZIP	MIAMI, FL											
TITLE	PD		☐ DELETE		CITY - S	i-zir		7	Change	Addition		
NAME	MECHOSO	. JULIO B			NAME				e ice igo	Addition	i	
STREET ADDRESS	1601 SW 1					YDDDECC						
CITY-ST-ZIP	MIAMI, FL			ľ		ADDRESS						
TITLE	TD		DELETE		1114-51	1 - 2117		<u> </u>	Change	Addition		
		, OSVALDO						ليان	าเซเฟิธ	☐ Magagan		
NAME CYDERY ADDRESS	134 NW 26			5.2								
STREET ADDRESS	MIAMI, FL					ADDRESS						
CITY-ST-ZIP	micini, FL	VVVVV	Dourse		ITY-S1	r-ZIP			N	4.5.00		
TITLE			☐ DELETE						Change	Addition		
NAME			_		IAME							
STREET ADDRESS				6.3 9	TREET	ADDRESS						
CITY-ST-ZIP				640	HY-SI	- ZIP						

Ido 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 africal 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.

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