FILE	FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00					- FILED	
COF	PROFIT RPORATION JAL REPORT	FLORIDA DEPARTI Sandra B. Secretary	Mortham		E	Feb 03 1998 8:00am	l
	1998 DIVISION OF COR			RPORATIONS		Secretary of State	
1	MENT # 42049 SSOCIATES, INC.	0 (5)					
1147	occontico, inc.						
Principal Place of Business Mailing Address							
2550 NW 72 AVE PO BOX 65-0547 SUITE 399 5 LL MIAMI FL 33265-0547 MIAMI FL 33122-1348 US						DO NOT WRITE IN THIS SPACE	
ี บร	US					3. Date Incorporated or Qualified	
Principal Place of Business     2a, Mailing Address						03/06/1973 4. FEI Number Applied For	
21						59-1443524 Not Applicat	bie
(Suite Apt. #, etc. 27)			-			5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & Stat	City & State City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees	
Zip Zip Country Zip 29 30			Country		<del></del> ,,	This corporation owes or has paid the current year Intangible	-
24 37 172-1048 25 29 30 9. Name and Address of Current Registered Agent				<u>)                                    </u>		Personal Property Tax due June 30. Yes No	_
DE	RLOW, JEFFREY M. ESQ.	nt Hegistered Agent		81 Na	me	10. Name and Address of New Registered Agent	
1880 E. HALLANDALE BCH BLVD				<b>82</b> Stre	not Addres	ss (P.O. Box Number is Not Acceptable)	
HALLANDALE FL 33009			Į		et Addre	ss (F.O. Box Number is Not Acceptable)	
				83		···	_
			İ	<b>84</b> City	/	F1 85 Zip Code	ヿ
11. Pursuant office or r	to the provisions of Sections 607.05 egistered agent, or both, in the State on familiar with, and accept the oblic	02 and 607.1508, Florida Statutes, e of Florida. Such change was aut nations of Section 607.0505, Floric	the at thorized da State	oove-named by the cutes.	ned corpo corporatio	oration submits this statement for the purpose of changing its registered on a board of directors. I hereby accept the appointment as registered	i d
SIGNATURE							_
12.	Signature, typed or printed name of registered ag	ent and little if applicable. (NOTE: F	Registered	i Agent sign	ature required	d when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ᆜᅊ
TITLE	VST	DELETE	1.1 TITLE			Change Additi	<u></u> ≥
NAME	ARIAS, JULIO		1.2 NAME		}		S S S CR2E034 (10/97
Street Address			1.3 STREET ADDRESS		ess		Ö
City-St-ZIP	WELLINGTON FL			1.4 CITY-ST-ZIP		Ohanga Education	
TITLE NAME	P DELETE LECUSAY, ARMANDO		2.1 TITLE 2.2 NAME			Change Additi	ם ן
STREET ADDRESS	6031 SW 114 CT 7520	SW 107 AUE Apt6106	2.3 STI	REET ADDRE	ss		İ
City-ST-ZIP	MIAMIFL MI. A	MI, PL 33173-2992	Ŧ	TY-ST-ZiP	1		Į
TITLE	☐ DELETE		3.1 TITLE			Change Additi	on
NAME			3.2 NA	ME			İ
STREET ADDRESS				REET ADDRE	SS		
CITY-ST-ZIP	DELETE		3.4. CITY - ST - ZIP 4.1 TITLE			Change Addition	
TITLE			4.1 III 4.2 NA		Ì	C. Ottonido C. Unquin	
STREET ADDRESS			į.	REET ADORE	ss		
CITY - ST - ZIP				Y-ST-ZIP			
TITLE		☐ DELETE	5.1 TIT			☐ Change ☐ Additi	JN.
NAME			5.2 NA	ME	1		Ì
STREET ADDRESS				reet addre	ss		
CITY-ST-ZIP TITLE		DELETE	5.4 CIT 6.1 TIT	Y-ST-ZIP		Change Addition	00
FFT LLC			9-1 1151			Li viango El Audan	

6.2 NAME

63 STREET ADDRESS

NAME STREET ADDRESS

14. I 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 of 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 or the same legal effect as if made under oath; that I am an officer or director of the corporation of 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 or the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of 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 or the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of 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 or the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an