## 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 # 43567**1

(3)

VACRUZ, INC.

NAVi

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STREET ADDRESS

STREET ADDRESS.

SIGNATURE:

14. I do hereby certify that the information supulied with information and safed on this supular expert of supply

information indicated on this special re-tiam an officer or director of the corpor

011Y-51-24:

CITY - \$1 - 7(2)

Principal Place of Business Mailing Address 3305 E 4TH AVENUE 3305 E 4TH AVENUE HIALEAH FL 33013-0005 HIALEAH FL 33013-3005 3. Date Incorporated or Qualified 3a. Date of Last Report 11/26/1973 03/05/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1515122 26 Not Applicable 21 Suite Apr. # etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country  $Z \phi$ 200 Country 8. This corporation has liability for intarigible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name MOLINER, ELIU 3305 E 4TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33013-0005 83 City 84 Zip Code 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. Lam familian with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE 5) pluming type dion per hid mame of registered agent and lite if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 96/6) 12 13. **PVST** Change Addition DELETE 1.1 TITLE HILE MOLINER, ELJU CR2E034 12 NAME NAME 3305 E 4TH AVENUE 1.3 STREET ADDRESS STREET ADDRESS HIALEAH FL 33013-0005 1.4 CITY - ST - ZIP DITY: ST DELETE Change Addition 2 1 TITLE MOLINER, ELIU NAME 3305 E 4TH AVENUE STREET ADDRESS 2.3 STREET ADDRESS HIALEAH FL 33013-0005 2 4 CITY - ST- ZIP CHY-ST 769 DELETE Change Addition 31 TITLE D1 6 3.2 NAME DAME STREET ADORESS 3.3 STREET ADDRESS 3.4. CITY - ST-ZIP CHY-\$1-74 DELETE Change Addition Till E 4.1 TITLE 4 2 NAME NAME 4.3 STREET ADDRESS ISTROLITATIONS. 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE THILL 5.2 NAME

5.3 STREET ADDRESS

54 CITY-ST-ZIP

6.4 CITY - ST- ZIP

is filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the supplymental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the receiver or trustee empowered to execute this report as repeived by Chapter 607, Florida Statutes; and that my name

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

FILED

Mar 12 1997 8:00am

Secretary of State

0118731

Change

Addition