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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 455222

(0)

FILED Apr 25 1997 8:00am Secretary of State

| Principal Place of Business Mailing Address 1001 HALEAH DRIVE 1001 HIALEAH DRIVE HALEAH, FLORIDA \$3010 | | | | | | | |
|--|---|--|---|--------------|---|------------------------|-----------------------------|
| 100 to 10 | | | | | Date incorporated or Qualified 06/24/1974 | 3a. Date of 04/16/19 | |
| 2. Principal P | Place of Business | 2a. Mailing Address | | | 4. FEI Number | 10110 | Applied For |
| 21 26 | | 26 | 26 | | 59-1555110 | Not Applicable | |
| Sulte, Apt. #, etc. | | Suite, Apt. #, etc. | <u>├</u> | | 5. Certificate of Status Desired | [] | .75 Additional |
| City & State | | City & State | | | | ee Required | |
| 23] | C | 28 | | | 6. Election Campaign Financing Trust Fund Contribution | | 5.00 May Be dded to Fees |
| Zip | Country | Zip | Country | · | 6. This corporation has liability for | r intangible tax ur | |
| 24 | 25 | 29 | 30 | | | Yes 🗌 No | |
| OD! | Name and Address of CurrerWDE, FRANCISCO | it Hegistered Agent | 81 | Name | 10. Name and Address of New R | egistered Agent | |
| | 1 SW 4TH ST | | | | | | |
| | MI, FL | | 82 | Street Add | ress (P.O. Box Number is Not Accepta | ibie) | |
| 331 | 74 | | 83 | | | | |
| | | | 84 | City | | 85 | Zip Code |
| 41 Durament | to the provinces of Spetiers 607.000 | 22 and 607 1509. Elorida Statu | ton the about | o parred cor | poration submits this statement for the tion's board of directors. I hereby acce | FL 83 | ains de terriplotos |
| SIGNATURE | Signature, typed or printed name of regisered agr OFFICERS AN | ercand tite if applicable (NOI D DIRECTORS | TE-Registered Age | | ired when reinstatury) ADDITIONS/CHANGES TO OFF | DATE ICERS AND DIRE | CTORS IN 12 |
| NAME STREET ADDRESS OTTY- ST-ZIP | PD GRANDE, FRANCISCO 9541 SW 4TH ST MIAMI, FL 00000 | ☐ OELE1E | 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S | | | i_ Ci | nange L Addition |
| TITLE | D | DELETE | 2.1 TITLE | | | □ CI | nange Addition |
| NAME | GRANDE, MANUEL | | 2.2 NAME | | | | |
| STREET ADORESS | 2720 SW 129 AVE | | 2.3 STREET | ADDRESS | | | |
| CHY-ST-ZIP | MIAMI, FL 00000 | DELETE | 2. 4 CHY-5 | ST-ZIF | | | range Addition |
| NAME | GRANDE, JOSE | out | 3.2 NAME | | | ان زیر | go Agomon |
| STREET ADDRESS | 6531 SW 106TH AVE | | 3.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | MIAMI, FL 00000 | | 3 4. CITY - 5 | ST - ZIP | | | |
| TITLE | | ☐ DELETE | 4.1 TOLE | | | | nange 🔲 Addition |
| NAME OTDEET ADDRESS | | | 4. 2 NAME | Anneed | | | |
| CITY-ST-ZIP | | | 4.3 STREET 4.4 CITY - S | | | | |
| TITLE | | DELETE | 5 1 TITLE | | | C | nange 🔲 Addition |
| NAME | • | | 5.2 NAME | | | | |
| STREET ADDRESS | | | 5.3 STREE I | | | | |
| OTY-ST-ZIP | <u> </u> | DILFTE | 5.4 CHY- S | 1 - ZIP | | □ cı | nange Addition |
| TITLE | | ריז מונוך | 6.1 TITLE 6.2 NAME | | | 니 | юнус <u>Ш</u> АЭӨШӨП |
| STREET ADDRESS | | | 63 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | 6.4 CITY - S | | | | |

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 repert 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 corporation 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 tryinger, over an attachment with an address.

CICNATURE

Presiden

4/18/97 (3.5)885-3301