FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 504174

(4)

SIGNATURE:

Principal Place 1324 NW 29TH MIAMI FL 3314	STREET	Mailing Address 1324 NW 29TH STREET MIAMI FL 33142-6620							
						3. Date Incorporated or Qualifi 05/27/1976		ate of Last R 06/1996	leport
2. Principal F	Piace of Business	2a. Mailing Address			4. FEI Number			oplied For	
21		26			59-1680707			ot Applicable	
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	ı 🗇	\$8.75	Additional	
22		27			6. Certificate of Status Desired		Fee Re	equired	
City & Stat	le	City & State			6. Election Campaign Financin	~ ~		May Be	
23		28				Trust Fund Contribution			to Fees
Ζιρ 24]	Country 25	Zip	Cou	nıry		8. This corporation has liability	for intangible		. 199.032,
24]	g, Name and Address of Curre	29 ont Registered Agent	30			Florida Statutes 10. Name and Address of New			
SAN	ICHEZ, CARLOS E.			81	Name	10,		- goin	
	4 NW 29TH STREET							 	
	MI FL			82	Street A	ddress (P.O. Box Number is Not Acce	ptable)		
*****				83		<u> </u>			
					<u> </u>			11	
				84	City	•	FL	. 65 Zip (Code
office or i agent. La SIGNATURE	registered agent, or both, in the State am familiar with, and accept the oblig Signature third or pointed name of registance ag	gations of, Section 607.0505, Flo	orida Stat	utes	i. '	oration's board of directors. I hereby a	CCEPT INE APP	iointment as	registered
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO C	FFICERS AN		
TIFLE	PD			1.1 TITLE				☐ Change	Addition
NAME			1.2 NA	AME					
STREET ADDRESS	1324 NW 29TH STREET			1.3 STREET ADDRESS					
C-TY+ST+ZIP			1.4 CI		T-ZIP				
TITLE	VD CANCUEZ MADIA C	☐ DELETE	2.2 NAME					L. Change	Addition
NAME	SANCHEZ, MARIA C. 8931 SW 52ND STREET								
STREET ADDRESS	MIAMI FL		2.3 STREET ADDRESS						
City - ST - ZIP TITLE	SD	DELETE	2. 4 CITY 3.1 TITLE		ST-ZIP			Change	Addition
NAME	GRAVES, DAVID A.								
STREET ADDRESS	3701 PARK AVE	I DADY AVE			ADDRESS				-
City-St-ZiP	MIAMI FL		3.4. CITY-ST-ZIP						,
THLE		DELETE		4.1 TITLE				Change	Addition
NAME			4. 2 NAME						_
STREET ADDRESS			4.3 STREET		ADDRESS				
City-St-ZiP	4.4.6		4.4 C						
TITLE		DELETE	5.1 TITLE					Change	Addition
NAMÉ			5.2 NA	AME					
STREET ADDRESS			5.3 S1	REET	ADDRESS				
CITY-ST-ZIP			5.4 CI	TY-\$	T-ZIP				
TITLE		DELETE	6.1 Ti	TLE				Change	☐ Addition
NAME			6.2 NA	AME					
STREET ADDRESS			6.3 ST	REET	ADDRESS				
OUT OF THE	1								

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 angual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of the receiver of trustee employers to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address.