## 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 # 523454

(7)

PELU INVESTMENT CORP.

					4				TERRI JUST		
Principal Place	e of Business	Mailing Address					i ibarat arris night rum gribt Arris arsi	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1811 Atali MIA11	U(#11 7##1	
525 E 9TH ST HIALEAH FL 33	010	525 E 8TH 8T HIALEAH FL 33010-4549									
			·				Date Incorporated or Qualified 02/02/1977		te of Last R 15/1996	eport	
2. Principal Pl	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number			Ap	plied For	
n		26				59-1758006		Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.				Certificate of Status Desired		\$8.75	Additional	
2		27				Definicate of Otatos Desired	<u> </u>	Fee Required			
City & State		City & State	City & State			6.	Election Campaign Financing	\$5.00 May Be			
3		28					Trust Fund Contribution		Added		
Z <sub>i</sub> p ∃∃	Country	Zip	Cour	ntry	,	8.	This corporation has liability for it			. 199.032,	
24]	25	29 29 Apost	30		<del> </del>	10	Fiorida Statutes  Name and Address of New Res		No		
9. Name and Address of Current Registered Agent					Name	10.	Name and Address of New ript	Viergien i	- Agorit		
	ra, Elias E 9th st		Į.	81	Harne	٠					
	EAH FL		ſ	82	Street Addr	ess (P	.O. Box Number is Not Acceptab	le)			
HIAL	EAN FL		}	83	· · · · · · · · · · · · · · · · · · ·						
				~							
			Ī	84	City			FL	<b>85</b> Zip	Code	
44 0	to the provisions of Sections 607.050	20 and CO7 1500 Florida Class	too the ob		a named says	Aratio	a submite this statement for the su		( obonojon il	to registered	
agent. Fai SIGNATURE	egistered agont, or both, in the State in familiar with, and accept the oblig	ations of, Section 607.0505, F	lorida Statı	utes	3.			t the app	ointment as	registered	
12.	Signature typed or printed hand of logistered agent and little if applicable (NOTE  OFFICERS AND DIRECTORS			Registered Agent signature require 13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PD DEL		1.1 7)7	LE					Change	Addition	
NAME	BOLINAGA, JOSE		1.2 NA	MĒ							
STREET ADDRESS	525 E 9TH ST		1351	REET	ADDRESS						
CITY-SI-7IP	HIALEAH FL		1400	۲۰S	31-21P			•			
Trick	8	☐ DELETE	21 TIT						Change	Addition	
NAME	Bolinaga, Luis		2.2 NA	ME							
STREET ADDRESS	525 E 9TH ST		2.3 ST	REET	ADDRESS						
CITY-ST-ZIP	HIALEAH FL		2.4 CI	TY - 9	ST-ZÍP						
Tare	D	DELETE	3.1 TIT	LE					Change	Addition	
NAME.	BOLINAGA, LUIS		3.2 NA	ME						+	
STREET ADDRESS	525 E 9TH ST		3.3 ST	REET	ADDRESS						
CITY ST-2IF	HIALEAH FL		3 4. C	TY-S	ST-ZIP						
TITLE	V	☐ DELETE	4.1 10	LE					☐ Change	☐ Addition	
NAME	GONZALEZ, CARMEN		4. 2 N	4ME			T.				
STREET ADDRESS	3330 W. 12TH AVE.		4.3 ST	REET	ADDRESS						
City - St - ZIP	HALEAH FL		4.4 CH	[Y-\$	ST-ZIP						
TITLE		☐ DELETE	5.1 T(T	LE					☐ Change	Addition	
NAME			5.2 NA	ME	1		••				
STREET ADDRESS			5.3 ST	REET	I ADDRESS						
CITY - ST - ZIP			5.4 CI	TY-S	31-2IP						
THIE		☐ DELETE	61 TIT	LE					Change	Addition	
NAME			62 NA	ME							
STREET ADDRESS			63 ST	AEET	ADDRESS						

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 or the receiver or turstee 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 attachpent with an address.

SIGNATURE:

CITY-ST-Z.P

Daytime Phone #

**FILED** 

Feb 14 1997 8:00am

Secretary of State

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