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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

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DOCUMENT # 531854 (8) 1. Corporation Name						
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rincipal Place c	o' Business	Mailing Address				
2719 N.W. 24TH STREET 2719 N.W. 24TH STREET MIAMI FL 33142 MIAMI FL 33142			ET			
MIRMI PL 3314	<b>N</b> Z	MINSMI I L DOTTE		3. Date Incorporated or Qualified	3a. Date of Last Re	eport
				04/13/1977	02/15/199	
Principal Place of Business		2a. Mailing Address		4. FEI Number	L	Applied For
		26		59-1783205		Not Applicable Additional
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1 7	Required
City & State		City & State		6. Election Campaign Financing	S5.0	May Be
]		28		Trust Fund Contribution		d to Fees
Zip	Country	Zφ	Country	8. This corporation has liability for Florida Statutes	r intangible tax under s s □ No	199.032,
<u> </u>	25 g. Name and Address of Curre	29 ent Registered Agent	30	10. Name and Address of New		
<b>.</b>	g. Name and Address of Conte	citt riegisteree rigeni	81 Name			
CHI, LUIS	3		82 Street A	ddress (P.O. Box Number is Not Accepta	nble)	
	V. 5TH STREET					
MIAMI FL	. 33144		83			
			84 City		FL 85 Z	p Code
				the state of the s	uropee of changing its i	registered office
or registere	o the provisions of Sections 607.050 ad agent, or both, in the State of Flo n, and accept the obligations of, Se	rida. Such change was authoriz	zed by the corporation sit	poration submits this statement for the placed of directors. Thereby accept the ap	pointment as registered	l agent. I am
or registere familiar with SIGNATURE	d agent, or both, in the State of Flo h, and accept the obligations of, Se signature, typed or printed name of ingestional age	ord and tited arranged was authorized on 607.0505, Florida Statutes ord and tited arranged like (N	ed by the corporation is to S. S. S. Begistered Agent signal on the	pard who han being	DATE	
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SIGNATURE: X SIGNATURE NAME OF SIGNING OFFICER OR DIRECTOR

(305) 633 - 2167