## 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 # 566534

(4)

LA EPOCA ELECTRONIC, INC.


## FILED Apr 30 1997 8:00am Secretary of State



Suite, Apt # , Etc.	Principal Place	e of Business	Mailing Ad	Mailing Address			i banian Stire miren miren bride linte anne Siner ment dinte minte minte ment esner				
Principal Place of Business   2a, Mailing Address   4. (EFTURINDE   Applied For   Next											
2. Prince of Business   28. Malling Address   28. Malling Address   28.   3. FEN Inventor   5.9-1886402   Not Applicable   5.9-1886402   Status   5.9-1886400   St											eport
Suite, Apit #, cir.	2. Principal P	lace of Business	2a. Mailing	Address					1		plied For
City & State	21		26				·	59-1886402		No	ot Applicable
Cly 6 State    Cly 6 State   Cly 6 State   Cly 8 State   Cly 8 State   Cly 8 State   Cly 8 State   Country   Zip   Country   Zip   Country   Zip   Country   Zip   Country   Zip   Country   25   Zip   Zip		#, Otc.	<b>├</b> ─┐ `	Apt. #, etc.				5. Certificate of Status Desired			
28	C.ly & State			State				6. Election Campaign Financing			
24	23		28					· •			
25		Country			Coun	itry		8. This corporation has liability for i	ntangible I	ax under s	. 199,032,
ALONSO, ANTONIO   ANTONI	24	25	29		30		•				·
SIGNATURE  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fornia Statutos, the above-named corporation submits this statement for the purpose of changing its registered degree, or health in the State of Florids Such Change and Editor of the provisions to Such Change and Editor of Pooling the Change and Editor			rrent Registered A	gent				10. Name and Address of New Re	gistered A	gent	
BE NE SECOND AVE MIAMI FL 33132    B2	ALO	NSO. ANTONIO				31	Name				
MIAMI FL 33132    83					يرا ا	-	Ctunet Add	seen /D.O. Day N. mhor is Not Assentah	10)		
B3   B4   City					"	"	Sueer Wool	ress (P.O. Box Number is Not Acceptab	(e)		
The 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 of 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 than familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNA					1	B3					
The 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 of 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 than familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNA					L	_				· · · · · · · · · · · · · · · · · · ·	
11. Provident to the provisions of Society's 607 G902 and 607 1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  III-  I					[8	B4	City		EI	<b>85</b> Zip	Code
SIGNATURE	<b>11</b> Dames cont	to the provisions of Sections 607	0502 and 607 1508	Florida Statut	toc the abo		-named corr	poration submite this statement for the n		changing it	e registered
SIGNATURE	office or r	egistered agent, or both, in the S	tate of Florida, Such	change was	authorized	by	the corporal	tion's board of directors. I hereby accep	it the appo	intment as	registered
12.	agent. La	m familiar with, and accept the ol	oligations of, Section	n 607.0505, FI	orida Statu	tes	•				
12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIGNATURE										
PTD	10			ie (NO		Ager	ni s gnaiure requi			DIDECTOR	S IN 12
NAME   STREET ADDRESS   CTY   ST. 27-   MIAMI   FL			AND DIRECTORS	DELETE		E	<del></del>	ADDITIONS/OFFINGES TO OFFIC	LIO AND		
STREET ADDRESS   STRE	1 1			orecic			1		,	Critings	and Radillon
City St. 2P					ı						
DELETE   Change   Addition   ALONSO, ANTONIO   22 NAME   23 STREET ADDRESS   CHY-ST-ZP    TRUE   Change   Addition   Ad	1						l				
ALONSO, ANTONIO   96 NE 2 AVE   2.3 STREET ADDRESS   CITY - ST - ZIP				Librate		_	T-ZIP			Chappa	Addition
STREET ADDRESS	1	***		I'') DELETE						Criange	L Addition
City - St - ZF											
TITLE	STREET ADDRESS				2.3 STR	EET.	ADDRESS				•
NAME		MIAMI FL		T"T			T-ZIP				
STREET ADDRESS				L_I DELETE			ĺ			∟, Unange	L Addition
STREET ADDRESS   SALCITY-ST-ZIP   SALCITY-ST-ZIP   SALCITY-ST-ZIP   STREET ADDRESS   SALCITY-ST-ZIP   SALC	NAME							•			
DELETE	STREET ADDRESS				3.3 STR	EET.	ADDRESS	•			
NAME         4 2 NAME           STREET ADDRESS         4 3 STREET ADDRESS           CITY ST 2/F         44 CITY - ST - ZIP           TITLE         DELETE         5.1 TITLE         Change Addition           NAME         52 NAME           STREET ADDRESS         5.3 STREET ADDRESS	h			F1 88			T-26P	==			·····
A STREET ADDRESS   A STREET ADDRESS   A 4 CITY - ST - ZIP   THE	THEF			["] DEFELE						∐ Change	Addition
A 4 CITY - ST - ZIP	NAME				4 2 NAI	ME	1				
THE DELETE 5.1 TITLE Change Addition  NAME  5.2 NAME  5.3 STREET ADDRESS  5.3 STREET ADDRESS	STEET ADDRESS				4 3 STA	EET	ADDRESS				
NAME SIDEL LADDRESS 5.3 STREET ADDRESS 5.3 STREET ADDRESS	CITY ST ZIF		7		4.4 CITY	Y - S1	r-zip		·		
STREET ADDRESS 5.3 STREET ADDRESS	THEE			[_] DELETE	5.1 TITL	.E				Change	Addition
	NAME				5 2 NAM	VIE					
CITY-ST-ZIP 54 CITY-ST-ZIP	STREET ADJURESS				5.3 STR	EET	ADDRESS				
■ <del>                                     </del>	CITY-ST-ZIP				5.4 CITS	<u>Y -</u> S1	T-ZIP				
THE DELETE 6.1 TITLE Change Addition	Tillef	, , , , , , , , , , , , , , , , , , , ,		DELETE	6.1 T(TL	L <b>E</b>				Change	Addition
NAME 6.2 NAME	NAME				6.2 NAM	VE					
STHEET ADDRESS							ADDRESS	•	•		
CHY-S'-7/P 64 CHY-ST-ZIP	+						1				

14. Ido here by 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 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 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 changed, or on an attachment with an address

SIGNATURE:

TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/9)

305-374-7731