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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	MENT # 58417	4 (7)			
Principal Place of Business 18301 N.W. 122ND AVENUE MIAMI FL 33016		Mailing Address 16301 N.W. 122ND AVENUE MIAMI FL 33018-1019			i Dibli gillik bildir dibli prêkî bildir indi
				3. Date Incorporated or Qualified 08/09/1978	3a. Date of Last Report 03/07/1996
2. Principal Pl	ace of Business	28. Mailing Address		4. FEI Number	Applied For
21		26		59-1845184	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Country	8. This corporation has liability for	r intangible tax under s. 199.032,
24	25	29	30		Yes No
	9. Name and Address of Curi	rent Registered Agent	81 Name	10. Name and Address of New R	egistered Agent
	RERA, RODOLFO		81 Name		
	1 NW 122ND AVE		82 Street Address (P.O. Box Number is Not Acceptable)		ible)
MICA	# FL 33016		83		
			84 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statute	es, the above-named cor	poration submits this statement for the	purpose of changing its registered
office or re agent if al	egistered agent, or both, in the Sta mustimiliar with land accept the ob-	ate of Florida. Such change was a Meations of, Section 607.05 <u>0</u> 5, Flo	authorized by the corpora orida Statutes.	tion's board of directors. I hereby acce	ept the appointment as registered
SIGNATURE	Gracia M. (Palsera GRI	ACIA. M. CAE	GRERA Secretar	1 1/16/97
	Signature, typed or printed name of registered		E: Registered Agent signature requi		DATE
12.	OFFICERS /	AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFI	Change Maddition
TITLE NAME	CABRERA, RODOLFO	M percii	1.1 HILE 1.2 NAME	ABRETA, RODOLFO Jr 6301 NW 122 AR	. Johange Troubles
NAME STREET ADORESS	16301 N.W. 122ND AVE.		1.3 STREET ADDRESS	6301 NW 122 AR	
CITY - ST- ZIP	MIAMI FL		1.4 CITY-ST-ZIP	HIALPAD FLADOUS	
THLE	SO	DELETE	2.1 TITLE		Change Addition
NAME	CABRERA, GRACIA		2.2 NAME	· ·	
STREET ADDRESS	16301 N.W. 122ND AVE.		2.3 STREET ADDRESS		
011Y - ST - ZIP	MAIMI FL	·····	2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		•
CITY - ST - ZIP TITLE		DELETE	3.4 CITY-ST-ZIP 4.1 TITLE	1455 ·	Change Addition
NAME		FT NEFER	4. 2 NAME		Fill Allendo First Manager
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			44 CITY-ST-ZIP		
TITLE		DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-SI-7:P			5.4 CITY-ST-ZIP		
TITLE		L_] DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
City-St-Zif	w corble that the information supri	afied with this filing does not quali-	fy for the exemption state	d in Section 119.07(3)(i), Florida Statut	tee. I further certify that the
informatio	n indicated on this annual renod r	or supplemental appual report is t	rue and accurate and tha	at my signature shall have the same legort as required by Chapter 607, Florida	ral effect as it made under oath, that

NING OFFICER OR DIRECTOR