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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 15 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 589980

(2)

FEPERS ENTERPRISES INC.

Principal Place	of Business	Mailing Address					- i insini alimi min inin dalim inin inin	II Offil Divis	84841 B1811 B1811	BIOLE IONI		
120 S.W. 33 AVE. MIAMI FL 93135-1133			120 S.W. 33 AVE. MIAMI FL 33135-1133									
								3, Date Incorporated or Qualified 10/31/1978		ale of Last R 01/1996	leport	
2. Principal Place of Business			2a. Mailing Address				//	4. FEI Number		Ar	oplied For	1
21			26 0/0 Cocil C				2//	59-1951187		No	ot Applicable	
Suite, Apt. #, etc.		-	Suite, Apt.			کار	10	5. Certificate of Status Desired		\$8.75		
City & State		27 74/	10H	gleu	20	Da Cir	Y		Fee Re	···	ł	
23	•	ŀ	20/1/01	Low	N.	${\mathcal Y}$	orida	6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added		
Zip	Countr	·	70	1011	Cou	intry	- 'CG	This corporation has liability for				ł
24	25	<u> </u>	29 3-3-3	27	30	Ζ.	S. A.			no No	. 199.032	ļ
	g. Name and Addre			nt 7-				10. Name and Address of New R	egistered	Agent		ì
	AD, AFIF					81	Name					
120 S.W. 33 AVE.						82	Street Addre	ess (P.O. Box Number is Not Accepta	ible)			ł
MIAI	VII FL 33134				i							<u> </u>
						83						
						84	City			85 Zip	Code	1
									FL	• <u> </u>		ļ
office or re	to the provisions of Sect egistered agent, or both m familiar with, and acc	i, in the State of F	lorida. Such c	haride was	authorize	d by	the corporation	oration submits this statement for the on's board of directors. I hereby accepts	purpose o ept the app	f changing it pointment as	ts registered registered	
SIGNATURE		-										Ì
	Signature, typed or printed name	·		(NC		d Age	nt signature require		DATE			ļ,
12. TITLE	PD	FFICERS AND D	IRECTORS	DELETE	13. 1.1 II			ADDITIONS/CHANGES TO OFF	CERS ANI	DIRECTOR Change	RS IN 12 Addition	- 2
NAME	MIGUEL, PEDRO		L) DELL IE	1.2 AV					[] Grange	L_ Addition	15
STREET ADDRESS	120 S.W. 33 AVE.						ADDRESS					8
CITY-ST-ZIP	MIAMI FL				1,3 S							Ļ
TITLE	80			DELETE	2.1 11		1-21			Change	Addition	5
NAME	FAYAD, AFIF		_	-	2.2 N							
STREET ADDRESS	120 S.W. 33 AVE.				I I		ADDRESS					
CITY-ST-ZIP	MIAM! FL				1		5T-2IP					
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NAME					3.2 N	AME						
STREET ADDRESS					335	TREET	ADDRESS					
CITY-ST-ZIP					3.4. 0	ITY-S	IT-ZIP	······				ļ
TITLE				DELETE	4,1 11	ILF	-			Change	Addition Addition	
NAME					4 2 N							Ì
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP				Librurae			T-ZIP					1
TITLE			L] DELETE	5111		}			☐ Change	Addition	1
NAME					5.2 N		155555					
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP TITLE				DELETE	5.4 Cl 6.1 H		1 - ZIP			Change	Addition	1
NAME			_	JULLETE	6.2 N					onange		
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP							T-ZIP					
L VIII VII ER					■ D.7 U							

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 of 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 of 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, of on any attachment with an address.