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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

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DOCUN	MENT # 6256	654 (9)				
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Principal Place	of Business	Mailing Address				
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1 GROVE ISL 1605	LE UK	1 GROVE ISLE DR 1605				
	ROVE FL 33133	COCONUT GROVE FL	33133	3. Date Incorporated or Qualified	3a. Date of Last Rep	\nd
US		US		06/13/1979	04/27/1995	
. Principal Pk	ace of Business	2a. Mailing Address		4. FEI Number		oplied For
		26		59-1928723	No.	ot Applicable
Suite, Apt. 4	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	
City & State		City & State		6. Election Campaign Financing	Fee Re	<u> </u>
]		28		Trust Fund Contribution	Added	
Zip	Country	Ζιρ	Country	8. This corporation has liability for		· · · · · · · · · · · · · · · · · · ·
<u></u>	25	29	30	Florida Statutes  Yes		
<del></del>	9. Name and Address of C	urrent Registered Agent	81 Name	10. Name and Address of New R	Registered Agent	
ALBERO	RZALI					
ALMAS,	IVAN E ISLE DR		82 Street Add	ress (P.O. Box Number is Not Acceptab	ole)	
1605	E ISLE UN		83			
	UT GROVE FL 33133					
COCOIN	0, 0,1012   2 00100		84 City		FI 85 Zip (	Code
1 Divariant	to the provisions of Sections 607	0502 and 607 1508. Florida Statute	to the characterist asset	action or beside this statement to the	roose of changing its red	istand off a
or register	ed agent, or both, in the State of	f Florida. Such channe was authorize	ed by the corporation's boa	ration submits this statement for the pur and of directors. Thereby accept the appr	piotocot as registered a	pistered Office
or registere familiar wit	ed agent, or both, in the State of	Fiorida. Such change was authorize, Section 607.0505, Florida Statutes.	ed by the corporation's boa	ration submits this statement for the pur ard of directors. I hereby accept the app	ointment as registered a	gent. I am
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appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

305 - 667-1728 Dato Daytma Presse #