FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

INC.											
Principal Place of Business Mailing Address							-		411 91811 81913 4	91811 B1811 3881	
1325 W. 30 ST 1325 W. 30TH ST HIALEAH FL 33012-4853 HIALEAH FL 33012-4853 US											
							3. Date Incorporated or Qualified 12/03/1974		ate of Last F 03/28/19		
2. Principal P	lace of Business	2a. Mailing 26	2a. Mailing Address 26			4. FEI Number Applied For NOT APPLICABLE Not Applied For					
Sulte, Apt.	#, etc.	Suite, /				5. Certificate of Status Desired			Additional Required		
City & State	е	City & 28					Election Campaign Financing Trust Fund Contribution			May Be I to Fees	
Zip	Country	Zip		Count	try		8. This corporation has liability for		tax under s	s. 199.032,	
24	9. Name and Address of Cur	29 29 rent Registered A		30			Florida Statutes 10. Name and Address of New Re				
}	5, Hamo and Addiess of Out	Tone riogisticiou A	gorit	8	31	Name	TO. Hame and Address of Hot His	Biaterea	-you		
VENTUR	IA, ERLAN B				32		(D.O. D.)	1-2	···		
461 E 5						Street Addre	ess (P.O. Box Number is Not Acceptal	ole)			
	1 FL 33013			8	33						
				8	34	City			85 Zip	Code	
dd Duranani	to the provinces of Continue C17 (VEO2 and 617 1500	Florido Ctatato	a tha abo	\perp		tion and analysis of the state	FL		ita namintana	
office or r	egistered agent, or both, in the St	ate of Florida, Such	i change was ai	uthorized	hv t	the corporation	oration submits this statement for the pon's board of directors. I hereby acce	ourpose of ot the app	changing i pointment as	its registered s registered	
1	m familiar with, and accept the ob	oligations of, Section	n 617.0503, Flor	rida Statut	tes.						
SIGNATURE .	Signature, typed or printed name of registered	agent and title if applicab	lo. (NOTE:	Registered A	Agenl	erluper erulangia l	d when reinstating)	DATE			
12.	OFFICERS AND DIRECTORS			13.	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12	
TITLE			DELETE	1.1 TITLE					Change	☐ Addition	
NAME					1.2 NAME						
STREET ADDRESS 461 E. 53RD. ST.			1.:		1.3 STREET ADDRESS						
CITY-ST-ZIP	HIALEAH FL		D pri fee	1.4 CITY		- ZIP					
TITLE	TD OLIEGADA ADMALDO		☐ DELETE	2.1 1(1)					☐ Change	Addition	
NAME QUESADA, ARNALDO STREET ADDRESS 17400 NW 68 AVE APT 119		n			2.2 NAME 2.3 STREET ADDRESS						
BRIARAL TO		8									
CITY-ST-ZIP TITLE	SD SD		DELETE	2. 4 CITY 3.1 TITLE		1-ZIP			Change	Addition	
NAME	FERNANDEZ, ISABEL			32 NAM				•	الما والما الم	nontroll	
STREET ADDRESS	8335 NW 178 ST					ADDRESS					
CITY-ST-ZIP	PALM SPRINGS N FL			3.4. CiTy		í					
TITLE			DELETE	4.1 1111.					Change	Addition	
NAME				4. 2 NAM	ИE						
STREET ADDRESS				4.3 STRE	EET A	ADDRESS					
CITY-ST-ZIP				4.4 CITY	'- ST-	- ZIP					
TITLE			☐ DELETE	5.1 101.6	E				☐ Change	Addition	
NAME				5.2 NAM	1E						
STREET ADDRESS				5.3 STRE	EET A	ADDRESS					
City-ST-ZIP				5.4 CITY	- ST -	- 7IP					
TITLE			☐ DELETE	6.1 TITLE					☐ Change	Addition	
NAME				6.2 NAM	1E						
STREET ADDRESS				63 STRE	EET A	DDRESS					

64 CITY-ST-ZIP

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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CIGNATURE:

FILED

Apr 08 1997 8:00am

Secretary of State