FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # 766072

(3)

6262 BIRD ROAD PROFESSIONAL BUILDING, INC.

Principal Place of Business Mailing Address C/O OCTAVIS A SANTURIO C/O OCTAVIS A SANTURIO					
6262 BIRD BO MIAMI EL 3315	AD SUITE 3E 55	6262 BIRD ROAD SUITE MIAMI FL 33155	3E	Date Incorporated or Qualified	3a. Date of Last Report
C/0 J	ose A. Garrido	, 	A. SAKELDO		07/10/1995
	ace of Business	2a. Måiling Address 26 6262 6	IND RD	4. FEI Number 59-2257605	Applied For Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State	AM, FC	City & State 28 M/Ami	,FC	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 331	Country USA	^{Zp} 33/55	Country	This corporation has liability for Florida Statutes	intangible tax under s. 199.032, ☐ Yes ☐ No
	9. Name and Address of Current		130	10. Name and Address of New I	
Garrido 6262 bir	nd iy qad			dress (P.O. Box Number is Not Acceptate	RD, INC
Suite 28 Miami by	-/ \		83 2	suite ab	
MIDAMI	. 33133 🐧		84 City	MIAMI	FL 85 Zocode S
12.	Signature, typed in printed dine of registered agent at OFFICERS AND	DIRECTORS	Jose A. 9 Je Justereo Agent signature renic 13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
NAME STREET ADDRESS CITY-ST-ZIP	PD SANTURIO, OCTAVIO 6262 BIRD RD., #3E MIAMI FL	□ DELETE	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	DIRECTOR	Change 🗀 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAHLAN, THOMAS J. 6262 BIRD RD. #34-B MIAMI FL	DEFELE	21 TITLE 22 NAME 23 STREET ADDRESS 2 4 CITY-ST-ZIP	DELETE	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARRIDO, JOSE A. 6262 BIRD RD., #2A MIAMI FL	DELETE	3 1 TITLE . 32 NAME . 33 STREET ADDRESS . 34 CITY-ST-2IP	PRESIDENT-DIRE SECRETARY	FC 70/R \(\sigma\) Change \(\sigma\) Addition
TITLE NAME STREET ADDRESS	MARIO AMBROS 6262 BIRD RD. # 3	DEFELE		DIRECTOR	☐ Change ★Addilion
CITY-ST-ZIP TITLE NAME STREET ADDRESS	MIAMI FL	DEFELE	4 4 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREEF ADDRESS	5000018! -06/07/96010 ***61.25	54805 008014 ^{Change} □ Addition
TITLE NAME STREET ADDRESS		DELETE	6 1 TITLE 6 2 NAME 6 3 STREET ADDRESS		□ Change □ Addition 05-01-96 6A
certify that oath; that	at the information indicated on this annua	al report or supplemental annuals also or the receiver or trusted	ual report is true and accu e empowered to execute:	y for the exemption stated in Section 115 irate and that my signature shall have th this report as required by Chapter 617, f	9.07(3)(k), Florida Statutes. I further