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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

7 11 41 40	1997	DIVISION OF C		Secret	ary of State
<ol> <li>Corporation</li> </ol>		) (5)			
	RA ORIENTE, INC.				
Principal Place of Business 205 S.W. 37TH AVE. 1300 IIAMI FL 33135 IS		Mailing Address 1205 S.W. 37TH AVE.  #300 MIAMI FL 33135-4226 US		3. Date Incorporated or Qualified	3a. Date of Last Report
				07/01/1961	09/11/1996
. Principal F	Place of Business	2a. Mailing Address 26		4, FEI Number 59-2875187	Applied For Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stat	le	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	<b>28</b>	Country	Trust Fund Contribution  8. This corporation has liability for	
	25 25 Name and Address of Curre		30	Florida Statutes  10. Name and Address of New Re	Yes No
ALV	AREZ, CLAUDIO I.	ur usåisteren Wäetii	81 Name	10. Name and Address of New A	Shereign White
1205 SW 37TH AVENUE			82 Street Add	dress (P.O. Box Number is Not Accepta	hie)
#30	00		Stibet Add	diess (1.0. Dox Humber is Not Accepta	010)
MIA	MI FL 33135		63		
			B4 City		FL 85 Zip Code
agent. La SIGNATURE	am familiar with, and accept the oblig		rida Statutes.  Registered Agent signature requ	rporation submits this statement for the ation's board of directors. I hereby acce	DATE DATE
2.	OFFICERS AF	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
TLE	PD ADVANCE OLAUDIO I	☐ DELETE	1.1 TITLE		Change Addition
AME	ALVAREZ, CLAUDIO I. 1205 SW 37 AVE #300		1.2 NAME		
TREET ADDRESS	MIAMI FL		1.3 STREET ADDRESS		
ITY-ST-ZIP ITLE	STD	DELETE	1.4 CITY-\$T-ZIP 2.1 TITLE		☐ Change ☐ Additio
IAME	CAMP, EDUARDO		2.2 NAME		· · · · · · · · · · · · · · · · · · ·
THEFT ADDRESS	1205 SW 37TH AVE #300		2.3 STREET ADDRESS	•	
TY-ST-ZIP	MIAMI FL		2. 4 CiTY-ST-ZIP		
ITLE	D	☐ DELETE	3.1 TITLE		Change Additio
LAME	ORTIZ, MAGDALENA A		3.2 NAME		
TREET ADDRESS	1205 S.W. 37TH AVE. MIAMI FL 33135		3.3 STREET ADDRESS		
ATY - ST - ZIP	D MIXMI FE 33133	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Additio
ITLE Jame	BROWN, CARMEN A.	Eng biccie	4. 2 NAME		hand - marger hand regarder
TREET ADDRESS	1205 SW 37 AVE #300		4.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL		4.4 CITY-ST-ZIP		
∏ <b>t€</b>	D	DELETE	5.1 TITLE		Change Additio
IAME	OBREGON, MARIA A.		5.2 NAME		•
TREE1 ADDRESS	1205 S.W. 37 AVE. #300		5.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL	Deser	5 4 CITY - ST - ZIP		<b></b>
TITLE		☐ DELETE	61 TITLE		Change Additio
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-SI-7P	by corlife that the information currell	ad with this filling does not qualif	6.4 CITY-ST-ZIP	ed in Section 119 07/31(i) Florida Statut	es. I further certify that the

illing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name I do hereby certify that the information supplied with this information indicated on this annual report or supplement am an officer or director of the corporation or the rocei appears in Block 12 or Block 13 if changed, or on an all chment with an address.

SIGNATURE:

FED NAME OF BIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPED OR PRIN

**FILED** 

Feb 06 1997 8:00am