SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)				
PRC CORPO	/.S/200.73	FLORIDA DEPARTI		
ANNUAL	مرين الآل	Secretary	of State	
<u> </u>	96	DIVISION OF CC	ORPORATIONS	
DOCUME  1. Corporation Nar	NT # F2617	2 (9)		
R + R RE	EAL ESTATE INVESTMEN	ITS INC		
Principal Place of 6		Mailing Address		s toernee side mate arret iterit toerie 1191 atant 81811 81811 81811 81811 81811 81811 81811
8284 EAST 6TH AVENUE HIALEAH FL 33013		6284 EAST-STH AVENUE HIALEAH FL-20013		
				3. Date Incorporated or Qualified 3a. Date of Last Report 03/20/1981 07/24/1995
2. Principal Place o	of Business	2a. Mailing Address 26 1005 S.W. 87	7TU AVE	4. FEI Number Applied For 65-0415164 Not Applied ble
Suite, Apt #, etc	3	Suite, Apt. #, etc.	THE AVE.	5 Certificate of Status Desired \$8.75 Additional
City & State		City & State MIAMI, FL.		6. Election Campaign Financing 55.00 May Be
Zip	Country	Zip 33174	Country U.S.A	Trust Fund Contribution L- Added to Fees  8. This corporation has liability for interigible tax under s 199 032,
9.	25 Name and Address of Current	[23]	U.S.A	Florida Statutes Yes No 10. Name and Address of New Registered Agent
CUTIERREZ, ANA- 81 Name ARANEGUI, MONICA				
			83	
			84 City	HIALEAH, FL 85 70 Code 33013
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.				
SIGNATURE Y	ure typed diprintent umo of registered agent	MONICA ARANEG	UI-PRESIDEN Begistered Agent signature r	VI (0-11-90
12.	OFFICERS AND		13. 11 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  P/D
1 1 1	GUTIERREZ, ANA	G same	1 2 NAME	ARANEGUI, MONICA
STREET ADDRESS CITY-ST-ZIP	1 <del>0471 G.W. BTH STREE</del> T M <del>IAMI FL 33174</del>		1.3 STREET ADORESS 1.4 CITY - ST - ZIP	6284 EAST 6TH AVE.
	sd Denis, Jose R	DELETE	2 1 TITLE 2 2 NAME	Change Addition
STREET ADDRESS	6284 EAST 6TH AVENUE		2 3 STREET ADDRESS	
	HIALEAH FL 33013 TD	DELETE	2 4 CHTY - ST - ZIP 3 1 THTLE	Change Addition
1 1	R <mark>AMIREZ, MANUEL J</mark> 5870 S.W. 2200 STREET	-	3.2 NAME 3.3 STHEFT ADDRESS	
CITY-ST-ZIP	MIAMI FL 93155	The second	3.4. C/TY - ST - Z/P	
	d Fernandez, Nelsa e	DELETE	4 1 TITLE 4 2 NAME	T/D X Change Addition FERNANDEZ, NELSA E.
	6284 EAST 6TH AVENUE HIALEAH FL 33013		4.3 STREET ADORESS	6284 EAST 6TH AVE.
TITLE		DELETE	4.4 CITY -ST - ZIP 5.1 TITLE	HILAEAH, FL. 33013 Change Addition
NAME Street address			5.2 NAME 5.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	5 4 C(TY - ST - ZIP 6 1 T(TLE	Change Addition
NAME		L. Section	6 2 NAME	
STREET ADDRESS CITY+ST+ZIP			6 3 STREET ADDRESS 6 4 City - St - Zip	
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes   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 onthe that Lap an other properties or divisor or furnishing any properties are properties.				
that my name appears in Block 12 st Block 13 if changed, or on an attachment with an address  MONICA ARANEGUI				
SIGNATURE:   MONICA ARANEGUI  PRESIDENT  SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  District Control of Control				

305-266-0575