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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Sporotory of State

	1998 DIVISION OF CORPORATIONS			ONS	Secretary of State		
	MENT # F(	61804 P.	(3)				
1111201	OUTILIZETT COM	•					
Principal Plac	e of Business	Mailing	Address				8:011 8:011 8:011 8:011 8:01 8:01
784€ CORAL	WAY		9994 SW 31 TERR				
SUITE 440 Miami FL 33155		МАМ	MIAMI FL 33165			DO NOT WRITE IN TH	HS SPACE.
						3. Date Incorporated or Qualified	
2. Principal P	lace of Business	2a. Mai	ling Address			01/21/1982 4. FEI Number	Applied For
21		26	· · · · · · · · · · · · · · · · · · ·			59-2159481	Not Applicable
Suite, Apt.	#, e1c.	F1	Suite, Apt. #, etc.			5. Certificate of Status Desired	<b>\$8.75</b> Additional Fee Required
City & State	e		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28				Trust Fund Contribution	Added to Fees
Zip <b>24</b>	Country 25	/ Zф.		Country 30	<i>'</i>	<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	current year Intangible  Yes Managible
		ss of Current Registered	Agent			10. Name and Address of New Register	
	RRIZ, NOYLA			81	Name		
	94 SW 31 TERR		82	Street Add	fress (P.O. Box Number is Not Acceptable)		
Mit	AMI FL 33165			83			
				84	City	· · · · · · · · · · · · · · · · · · ·	<b>85</b> Zip Code
44 Dureupat I	to the provisions of Cost	507 0000 and 607 10	On Electeda Olde		1		- <b>L</b>
office or re	to the provisions of Section egistered agent, or both, or tenther with land according to the content of the con	ons our upuz and our, ra , in the State of Floridal Sr ant the obligations of Soc	008, FIDRICA Statu uch change was stan 607 0505, F	iles, the above authorized by Parida Statuter	e-named corpora	poration submits this statement for the purpos ation's beard of directors. I hereby accept the	e of changing its registered appointment as registered
SIGNATURE.	minimum with and acce	An the obligations of occ	, 100 001 001 100 001 11	IOTOS DISCUES	J.		
12,		of registered agent and title if appli FICERS AND DIRECTOR		TE: Registered Age	ent signature requ	ired when reinstating) DAY ADDITIONS/CHANGES TO OFFICERS (	
TITLE			DELETE			ADDITIONS/OFFANGES TO STATELING	Change Addition
NAME	BERRIZ, ARMANDO		1				
STREET ADDRESS	9994 SW 31ST TE	RR		1.3 STREET	ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL 33165		DELETE	14 CITY-ST-7IP DELETE 21 TITLE			Change Addition
NAME			L billie	2.2 NAME			C1 onside C1 vontrou
STREET ADDRESS				2.3 \$1REE1	ADDRESS		
CITY-ST-ZIP			F-1-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-	2.4 C/TY-S	ST - ZIP		
TITLE			DELETE	3.1 TITLE			Change Addition
NAME Street address				3.2 NAME 3.3 STREET	ADDRESS		
CITY-ST-ZiP				3.4 CITY- 5			
Tille			DELFTE	4.1 Tille			Change Addition
NAME				4. 2 NAME			
STREET ADDRESS				4.3 STREET 4.4 CITY-S			
CITY-ST-ZIP TITLE			DELETE	5.1 TITLE	11-215		Change Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET			
CITY-ST-ZIP TITLE			DELETE	5.4 CHY-S 6.1 THLE	T-ZIP	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			LJ bett 1	62 NAME			CT change CT Modition
STREET ADDRESS				63 STHEET	ADDRESS		
CITY-ST-ZIP			<del></del>	64 CITY-S	7 - <b>Z</b> IP		

Thereby 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: ADMANDS REPORTS

1 /7 /90

205-5520501

**FILED** 

Jan 20 1998 8:00am