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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H73743

(7)

JORGE A. DUARTE, P.A.

appears in Block 12 or Block

SIGNATURE AND THED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED
Jan 17 1997 8:00am
Secretary of State

10 97

Principal Place of Business Mailing Address 44 WEST FLAGLER STREET 44 WEST FLAGLER STREET						
SUITE 2400 MIAMI FL 33130-8856		SUITE 2400 MIAMI FL 33130-1856				
MINAMI FE SOTIA	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	MINMI PE SSTOPTOGO		3. Date Incorporated or Qualified 08/29/1985	3a. Date of Last F 05/01/1996	Report
· ·	lace of Business	2a. Mailing Address		4. FEI Number	L A	pplied For
21		26	*	59-2577222		lot Applicable
Suite Apt		Suite, Apt #, etc.		5. Certificate of Status Desired		Additional lequired
City & State	9	City & State		6. Election Campaign Financing		May Be
23 Z _i p	Country	28	Country	Trust Fund Contribution		to Fees
24	25	29	30	8. This corporation has liability for in Florida Statutes	ntangible tax under s Yes D No	s. 199.032,
[24]	9. Name and Address of Current		130	10. Name and Address of New Reg		
KFYI	FETZ, L, BARRY, ESQ		81 Name			
	V FLAGLER ST., #2400		82 Street Add	lress (P.O. Box Number is Not Acceptab	le)	
MIAN	MI FL 33130					
	4		83	RE Proposed Cons		
		The second secon	84 City	46 (fig. 4.7)	85 Zip	Code
11 Purcusal	to the province of Section 607 0500	loud 607 1509 Evalida Statut	on the above period cor	poration submits this statement for the pr	FL 3 20	ita vaniatavad
office or n	egistered agent, or both, in the State on familiar with land accept the obligation	of Florida, Such change was a	authorized by the corpora	tion's board of directors. I hereby accep	t the appointment as	s registered
	Signative, typed or per tridinance of nightered agen		E. Registered Agent signature requi		DATE	
12,	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFIC		
THLE NAME	DUARTE, JORGE A.	L. Decete	1.1 TULE		Change	Addition
STHEET ADDRESS	44 WEST FLAGER STREET		1.2 NAME			
CITY-\$1-ZIP	MIAMI FL		1.3 STREET ADDRESS 1.4 CITY - ST- ZIP	** 		
TiTLE	SD	DELETE	2.1 TITLE		Change	Addition
NAME	DUARTE, JORGE A.		2.2 NAME		4 •	
STREET ADDRESS	44 WEST FLAGLER STREET		2 3 STREET ADDRESS	The state of the s		
CITY-\$1-799	MIAMI FL		2 4 CITY-ST-ZIP			
T:TLF		DELETE	31 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
NAME			3.2 NAME			
STREET ADORESS			3 3 STREET ADDRESS			
CHY-ST-ZIF	 		3.4. CITY-ST-ZIP			
TOTLE		LLI DELETE	4.1 TITLE	•	Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY+S1+2IF		D process	4.4 CITY-ST-ZIP	·		
TITLE		L DELETE	5.1 TITLE		☐ Chánge	Addition
NAME			5.2 NAME			
STREET ADORESS			5.3 STREET ADDRESS			
CITY - ST - 21F TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change	Addition
NAME		E Deter	6.2 NAME		E change	LL AUGINON
STREET AUDRESS			6.2 NAME 6.3 STREET ADDRESS			
CITY-ST-ZIP					•	
14. I do heret	by certify that the information supplied	with this filing does not quali-	6.4 CITY-ST-ZIP y for the exemption state	d in Section 119.07(3)(i), Florida Statutes	. I further certify that	t the
informatio	n indicated on this armual report or su	ipplemental annual report is t	rue and accurate and tha	t my signature shall have the same legal rt as required by Chapter 607, Florida St	effect as it made un	ider oath, that