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PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## FILED Jun 17 1997 8:00am Secretary of State

62900 Guerra 6/12/97 (305) 557-02/1

1997 DOCUMENT # Lazaro Guerra, Inc. Principal Place of Business Mailing Address 2140 W. 68th Street 2140 W. 68th Street Hialeah, FC 33016 Higlogh, FL 33016 3. Date Incorporated or Qualified 3a. Date of Last Report 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable Suite. Apt \*. etc. Suite, Apt. #, etc. \$9.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, X Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 83 84 of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered for both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered and accept the obligations of, Section 607.0505, Florida Statutes. 11. Pursuant to the p Guprra 692010 nted name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS DELETE TITLE 11 TITLE Guerra, Lazare 2140 W. 68 th Street M. um., FL 33016 MAME 1.2 NAME STREET ADDRESS 13 STREET ADDRESS CITY-ST-ZIP 14 CITY-ST-ZIP DELETE TITLE 21 TITLE NAME 2 5 NAME STREET ADDRESS 23 STREET ADDRESS City - ST - ZIP 2 4 CITY-ST-ZIP ☐ DELETE 3 1 TITLE Change Add-tion NAME 32 NAME STREET ADDRESS 33 STREET ADDRESS CITY ST-ZIP 34 CITY-ST-ZIP DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 43 STREET ADDRESS CITY - ST - 21P 44 CITY-ST-ZIP TITLE DELETÉ Change 51 TITLE Addition 7,114 52 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY - 37 - 21P 5.4 City - ST - ZIP DELETE TITLE 5 1 TITLE Change **500000221535**5 -06/18/97--01016--010 6 2 NAME STREET ADDRESS 63 STREET ADDRESS \*\*\*165.00 CITY - ST - ZIP 64 CITY - ST - ZIP 14. I do nereby 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 antual 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 12 or Block 13 if chapted, or on an attachment with an address.