

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
 AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED  
AND  
FILED

97 OCT -1 AM 10:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # J02304 (0)  
1. Corporation Name  
N.W. 8TH STREET CORP.



Principal Place of Business Mailing Address

4020 SW 129TH AVE - MIAMI FL 33175  
1804 River Road Jacksonville, FL 32207

4020 SW 129TH AVE - MIAMI FL 33175  
1804 River Road Jacksonville Fla 32207

21 Principal Place of Business 2a. Mailing Address  
1804 River Road 1804 River Road

22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.

23 City & State Jacksonville Fl. 28 City & State Jacksonville, Fla

24 Zip 32207 25 Country DUVA 29 Zip 32207 30 Country DUVA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/04/1986 3a. Date of Last Report 01/24/1996

4. FEI Number 59-2647765 Applied For Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent

FERNANDEZ, MANUEL  
4020 SW 129TH AVE.  
MIAMI FL 33175

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

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. I hereby accept the appointment as registered agent. I am familiar with and approve the provisions of Section 607.0502, Florida Statutes.

SIGNATURE: Gladys Fernandez DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE <input type="checkbox"/>
NAME	FERBABDEZ, MANUEL	
STREET ADDRESS	4020 SW 129TH AVE.	
CITY-ST-ZIP	MIAMI FL 33175	
TITLE	VP	DELETE <input type="checkbox"/>
NAME	FERNANDEZ, GLADYS	
STREET ADDRESS	4020 SW 129TH AVE.	
CITY-ST-ZIP	MIAMI FL 33175	
TITLE		DELETE <input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE <input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE <input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition

1.2 NAME 800002317728-2

1.3 STREET ADDRESS -10/10/97--01090--019

1.4 CITY-ST-ZIP \*\*\*\*\*550.00 \*\*\*\*\*550.00

2.1 TITLE  Change  Addition

2.2 NAME GLADYS FERNANDEZ

2.3 STREET ADDRESS 1804 RIVER ROAD

2.4 CITY-ST-ZIP JACKSONVILLE - FLA 32207

3.1 TITLE  Change  Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE  Change  Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

G. Alan  
10/1/97

14. I do hereby 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, or on an attachment with an address.

CR2E034 (4/97)