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.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED							
Aug	15	1997	8:00am				
Sec	cret	tary of	f State				

1. Corporatio	MERCIAL, J. SIMON, INC. e of Business STREET	` '	34	DO NOT WRITE 3. Date Incorporated or Qualified	E IN THIS SPACE 3a. Date of Last Report
2. Principal P	lace of Business	2a. Mailing Address		11/18/1986 4. FEI Number	07/09/1996 Applied For
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		59-2747604	Not Applicable \$8.75 Additional
22	#, 0 10.	27		5. Certificate of Status Desired	Fee Required
City & Stat	е	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	This corporation owes or has partial to the second of	
24	25	29	30	Personal Property Tax due June	
QIN.	Name and Address of Cur ION, JORGE J.	rent Hegistered Agent	81 Name	10. Name and Address of New Re	egistered Agent
	141 SW 136 COURT			ress (P.O. Box Number is Not Accepted	olo)
MIA	MI FL 33177				ole)
			83		
			84 City		FL 85 Zip Code
agent. I a SIGNATURE	Signature, typed or printed name of registered		Torida Statutes. TE: Registered Agent signature requi	poration submits this statement for the partion's board of directors. I hereby accelered when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE
TITLE	PD	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	SIMON, JORGE J.	_	1.2 NAME		
STREET ADDRESS	180471 SW 136 CT		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL VT	DELETE	1.4 CITY - ST - ZIP		Obassa Taddision
TITLE	SIMON, MAGALY	F") DETELIE	2.1 TITLE 2.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	18041 SW 136 CT		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME Street Address			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP			34. CITY-ST-ZIP		
TITLE		DELETE	4.1 TOTLE		Change Addition
NAME			: 4. 2 NAME		ļ
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELE1E	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		- Andrea	5.4 CITY-S1-ZIP	·	
TITLE		DELETE	6.1 TITLE		Change Addition
name Street address			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP			6.3 STREET AUDRESS	÷	
	or codification the information of the	Lad with this filling stone and area		d in Section 110.07(2VI) Elevide Statute	a difference and if the dish a

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 of 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 in changed, or on an attachment with an address.

JORGE J SIMON PRES,

8/12/97 (305) 447-0166