PROFIT CORPORATION				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham				FILED Feb 04 1998 8:00am					
ANNUAL REPORT				Secretary of State DIVISION OF CORPORATIONS				Secretary of State					
DOCUI	MENT	# K064	54	(8)						orota	i y O	150	iaio
•	CORPORA	ATION		. ,									
									Í (BBIRNI) BH (B hi				
Principal Plac	e of Business		Ma	ailing Address									
% ENI G. SA				& ENI G. SANCHEZ					٠				
1082 W. 718	ST ST	1082 W. 71ST ST						O NOT WRIT	E IN THIS S	PACE			
HIALEAH FL 33014 HIALEAH FL 33014									3. Date Incorporate		L 114 13 110 C		
									12/11/1987				
2. Principal Place of Business				2a. Mailing Address				_	4. FEI Number	- / (12011		Applied For
Suite, Apt. #, etc.				Suite, Apt. #, etc.					-59 183170		0030/8		Not Applicable Additional
22						- 1		5. Certificate of Stat	us Desired			Required	
City & State				City & State					6. Election Campaig				0 мау Ве
Zip		Country	28	Zip		Country			8. This corporation		aid the curr		to Fees
24		25	29		30				Personal Property	/ Tax due Jun	e 30. 🛚 🗀	Yes	□ No
		and Address of Curr	ent Regist	tered Agent		81	Name		10. Name and Addre	ess of New R	egistered A	gent	
	anchez, en 182 w. 71st							.	<u> </u>				
	ALEAH FL 3					82	Street	Adare	ss (P.O. Box Number is	Not Accepta	ible)		
						83			••••				
						84	City				FI	85 Zip	Code
11. Pursuant	to the provision	ons of Sections 607.0	02 and 60	07.1508, Florida Sta	lutes, th	e above	-named	corpo	ration submits this stat	ement for the		changing	its registered
office or r agent. I a	registered age im familiar wit	ent, or both, in the Sta h, and accept the obl	te of Floric gations of	la. Such change wa , Section 607.0505,	as author Florida :	rized by Statutes	the cor	poratio	oration submits this state on's board of directors.	i hereby acce	pt the appo	ointment a	s registered
SIGNATURE													
12.	Signature, lyped o	x printed name of registered a OFFICERS A				stered Agen	t signature	required	a when reinstating) ADDITIONS/CHAN	GES TO OFF	DATE CERS AND	DIBECTO	RS IN 12
TITLE	PĎ	4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		DELETE		.1 TITLE		Γ		<u></u>	-	Change	
NAME		Z, ENI G.			1	L2 NAME							
STREET ADDRESS	1082 W. HIALEAH	71ST ST				1.3 STREET A		1					
CITY-ST-ZIP TITLE	STD	1 174		DELETE		1.4 CITY-ST 2.1 TITLE	- 4IP	-				Change	Addition
NAME		ez, carmen			2	2 NAME		ľ				_	
STREET ADDRESS		71ST ST			2	.3 STREET #	DDRESS						
CITY-ST-ZIP	HIALEAH	f FL		DELETE		. 4 CITY - 51 3.1 TITLE	r-ZIP					Change	Addition
TITLE NAME				E Detric		3.2 NAME						Grazige	Addition
STREET ADDRESS						3.3 STREET /	DDRESS						
CITY-ST-ZIP					3	1,4. CITY-\$1	- ZIP	<u> </u>					
TITLE				DELETE		I.1 TITLE						Change	Addition
NAME STREET ADDRESS					- 6	I, 2 NAME I,3 STREET A	UUSEcc						
CITY-ST-ZIP				•		i.a a ince i r i.4 City - St	-						
TITLE	****			DELETE		.1 TITLE						Change	Addition
NAME					- 6	.2 NAME		1					
STREET ADDRESS						.3 STREET A							
CITY - ST - ZIP TITLE				DELETE		4 CITY-ST	- ZIP	 				Change	Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

14. I 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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE:

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1/23/98 \$ 822.8877