EII	E	MOW-	FILING	FFF	AFTFR	MAY 1	IS	\$225.00
rii	г	MILIUV.	TIL.ING	1 LL	AL 1 L.	11111		W

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Scorelary of State
DIVISION OF CORPORATIONS

1996

OCUM Corporation Na INTERVE			(7)				. A.B. A.B. B.B. B.B.	141 818 14 8 1	a() b (6() 1883
MITTIVE	Of DEVELOR MENT GIVE								
rincipal Place of	Business	Mailing Ad.	tress						
4131 LAGUNA ST 4131 LAGUNA ST									
CORAL GABLE	S FL 33146	CORAL	GABLES FL 33	1146		3. Date Incorporated or Qualified	3a. Date of t	ast Rep	ort
						01/11/1988		1/199	
2. Principal Place	e of Business	2a. Mailing	Address			4. FEI Number		⊢ +	plied For
i, i i i kopa i i ka		26				65-0026035		L	ot Applicable Additional
Suite, Apt. #,	elc.	r	Apt. #, etc.			5. Certificate of Status Desired			equired
2]		27 City 8 S	State			6. Election Campaign Financing		\$5.00	May Be
Orty & State		28				Trust Fund Contribution		Added	
Z _i p	Country	2ιρ		Country	i	8. This corporation has liability for	intangible tax u s □ No	nders 1	199.032,
4	25	29		[30]		Florida Statutes Yas 10. Name and Address of New F		ent	
	9. Name and Address of Currer	nt Registered A	lgent	81	Name	10. Teams and Address			
						dress (P.O. Box Number is Not Acceptal	hle)		
	PEDRO A. ESQ.			82	Street Add	dress (P.O. Box Number is Not Acceptati			
7010BHK SUITE 16	CKELL AVE			83					
MIAMI FI				84	City		_	85 Ζφ	Code
				1	1 '		<u> </u>		to-od office
11. Pursuant to or registere familiar with	the provisions of Sections 607,050 d agent, or both, in the State of Flor i, and accept the obligations of, Scc	92 and 607.1508. nda. Such chang ction 607.0505, F	Iorida Statute	5.		oration submits this statement for the pu and of directors. Thereby accept the app		gistered	agent. Lam
or registere familiar with	diagent, or both, in the State of no i, and accept the obligations of, Sco gradual types the complete that of OFFICERS AP	ction 607.0505, F	lorida Statute	5. uris 6. julieni 1 Ağı 13.	est award to be pe	oration submits this statement for the pu ard of directors. Thereby accept the app ক্ষায়ান ক্ষায়াল ADDITIONS/CHANGES TO OF	DATE HICERS AND D		··
or registere familiar with SIGNATURE	of agent, or both, in the State of noise, and accept the obligations of, Scotopation by the principle of the OFFICERS AND P	ction 607.0505, F	lorida Statute	13.	est Sweet 16 to be	e júlie e útitaj	DATE HICERS AND D	IRECTO	RS IN 12
or registere familiar with SIGNATURE 5 12. TIFLE NAME	of agent, or both, in the State of For i, and accept the obligations of, Sco- ignature by refer plant them of reput milester OFFICERS AP DP BASCUAS, ERNESTO	ction 607.0505, F	lorida Statute	011 64 June 1 Ap 13. 1 1 TULE 1 2 NAME	end sawtal the fit for	e júlie e útitaj	DATE HICERS AND D	IRECTO	RS IN 12
or registere familiar with SIGNATURE 5 12. 11. IIILE NAME. STREET ADORESS	o agent, or both, in the State of noi, and accept the obligations of, Sco. OFFICERS AND DP BASCUAS, ERNESTO 4131 LAGUNA STREET	ction 607.0505, F	lorida Statute	011 64 June 1 Ap 13. 1 1 TULE 1 2 NAME	EL ADDRESS	e júlie e útitaj	DATE FICERS AND D	IRECTOR Change	RS IN 12
or registere familiar with SIGNATURE 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP	of agent, or both, in the State of Form, and accept the obligations of, Scotling and accept the obligations of, Scotling and American Scotling and America	Chon 607,0505, F	lorida Statute	5. 13. 1 1 THE 12 NAME 1 3 S185	EL ADDRESS	e júlie e útitaj	DATE FICERS AND D	IRECTO	RS IN 12
or registere familiar with SIGNATURE 5 12. THE NAME STREET ADORESS CHY-ST-ZIP THE	o agent, or both, in the State of noi, and accept the obligations of, Sco. OFFICERS AND DP BASCUAS, ERNESTO 4131 LAGUNA STREET	Chon 607,0505, F	Torida Statute	13. 11. 1 1 TULE 1 2 NAME 1 3 SHEE 1 4 CUY.	EL ADDRESS -ST ZIP E	e júlie e útitaj	DATE FICERS AND D	IRECTOR Change	RS IN 12
or registere familiar with SIGNATURE 5 12. TIFLE NAME STREEF ADORESS CHY-ST-ZIP TIFLE NAME	o agent, or both, in the State of Formation, and accept the obligations of, Scotling and accept the obligations of, Scotling and American State of Formation, and accept the obligations of, Scotling and American State of Formation and American State of Fo	Chon 607,0505, F	Torida Statute	0.1 Fe Joseph (A) 13. 1 1 THE 12 NAM 1 3 SHS 14 CHY 2 1 THE 22 NAM 23 SHS	EL ADDRESS EL ADDRESS EL EL ADDRESS	e júlie e útitaj	DATE FICERS AND D	IRECTOR Change	RS IN 12
or registere familiar with SIGNATURE 12. TITLE NAME STREET ADORESS CHY-ST-ZIP TITLE NAME STREET ADDRESS	o agent, or both, in the State of Fig. , and accept the obligations of, Sci. OFFICERS AN DP BASCUAS, ERNESTO 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL	TION 607, 0505, F	OELETE	13. 1 1 TULE 12 NAME 13 STRE 14 CITY 2 1 TULE 22 NAME 23 STRE 24 CUT	EL ADDRESS EL ADDRESS EL ADDRESS -ST ZIP EL ADDRESS -ST ZIP -ST ZIP	e júlie e útitaj	HCERS AND D	IRECTOR Change	RS IN 12
or registere familiar with SIGNATURE 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE STREET ADDRESS CHY-ST-ZIP TITLE	o agent, or both, in the State of Fig. , and accept the obligations of, Sci. OFFICERS AN DP BASCUAS, ERNESTO 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DST	TION 607, 0505, F	Torida Statute	0.1 Fe Joseph (A) 13. 1 1 THE 12 NAM 1 3 SHS 14 CHY 2 1 THE 22 NAM 23 SHS	E EL ADDRESS EL ADDRESS EL ADDRESS EL ADDRESS SI ZP E	e júlie e útitaj	HCERS AND D	IRECTOR Change Change	RS IN 12 Addition Addition
or registere familiar with SIGNATURE 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME	o agent, or both, in the State of Fig. and accept the obligations of, Sci. OFFICERS AP DP BASCUAS, ERNESTO 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DST POSE, MANUEL	TION 607, 0505, F	OELETE	13. 1 1 TULE 1 2 NAME 1 3 STBS 1 4 CUY. 2 1 TULE 2 2 NAME 2 3 STBS 2 4 CUY. 3 1 TULE 3 2 NAME	E EL ADDRESS EL ADDRESS EL ADDRESS EL ADDRESS SI ZP E	e júlie e útitaj	HCERS AND D	IRECTOR Change Change	RS IN 12 Addition Addition
or registere familiar with SIGNATURE 12. TILE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS	DP BASCUAS, ERNESTO 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DST POSE, MANUEL 4131 LAGUNA STREET	TION 607, 0505, F	OELETE	13. 1 TULE 1 2 NAME 1 3 STBS 1 4 CUY 2 STBS 2 4 CUY 3 TTBL 3 2 NAME 3 3 STBS 3 3 STBS 3 3 STBS 3 3 STBS	EL ADDRESS -ST ZIP E EL ADDRESS -ST ZIP E EL ADDRESS -ST ZIP E	e júlie e útitaj	HICERS AND D	IRECTOR Change Change	RS IN 12 Addition Addition Addition
OF TEGISTERE FAITH TO THE TEGISTER TO THE TEG	o agent, or both, in the State of Fig. and accept the obligations of, Sci. OFFICERS AP DP BASCUAS, ERNESTO 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DST POSE, MANUEL	TION 607, 0505, F	OELETE	13. 1 TULE 1 2 NAME 1 3 STBS 1 4 CUY 2 STBS 2 4 CUY 3 TTBL 3 2 NAME 3 3 STBS 3 3 STBS 3 3 STBS 3 3 STBS	EL ADDRESS -ST ZIP -ST ZIP -ST ZIP -ST ZIP -ST ZIP	e júlie e útitaj	HICERS AND D	IRECTOR Change Change	Addition
or registere familiar with SIGNATURE 12. IIILE VAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE	DP BASCUAS, ERNESTO 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DST POSE, MANUEL 4131 LAGUNA STREET	TION 607, 0505, F	DELETE DELETE	13. 1 1 TULE 12 NAME 13 STRS 14 COV. 2 1 TULE 22 NAME 23 STRE 24 COV. 3 1 TULE 32 NAME 33 STRE 34 COV.	EL ADDRESS -ST ZIP E EL ADDRESS -ST ZIP E EL ADDRESS -ST ZIP E E ST ZIP E E ST ZIP E E ST ZIP E	e júlie e útitaj	HICERS AND D	IRECTOR Change Change	RS IN 12 Addition Addition Addition
OF TEGISTERE FARME STREET ADDRESS CHY-ST-ZIP TITLE NAME	DP BASCUAS, ERNESTO 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DST POSE, MANUEL 4131 LAGUNA STREET	TION 607, 0505, F	DELETE DELETE	13. 1 1 TULE 12 NAME 13 STRE 14 CUY 2 1 TULE 22 NAME 23 STRE 24 CUY 3 1 TULE 32 NAME 33 STRE 34 CUY 4 TULE 42 NAVE 43 STRE 44 STRE	ELI ADDRESS -ST ZIP E ELI ADDRESS -ST ZIP E ELI ADDRESS -ST ZIP E ELI ADDRESS -ST-ZIP E ELI ADDRESS	e júlie e útitaj	HICERS AND D	IRECTOR Change Change	RS IN 12 Addition Addition Addition
or registere familiar with SIGNATURE 12. IIILE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP CHY-ST-ZIP CHY-ST-ZIP CHY-ST-ZIP CHY-ST-ZIP CHY-ST-ZIP CHY-ST-ZIP	DP BASCUAS, ERNESTO 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DST POSE, MANUEL 4131 LAGUNA STREET	TION 607, 0505, F	DELETE DELETE	13. 1 1 TULE 12 NAME 13 STRE 14 CUY 2 1 TULE 22 NAME 23 STRE 24 CUY 3 1 TULE 32 NAME 34 CUY 4 1 TULE 42 NAVE 43 STRE 44 CUY 44 CUY	EL ADDRESS -ST ZIP E EL ADDRESS -ST ZIP E EL ADDRESS -ST ZIP E EL ADDRESS -ST-ZIP E EL ADDRESS -ST-ZIP E EL ADDRESS -ST-ZIP	e júlie e útitaj	HCERS AND D	IRECTOR Change Change	RS IN 12 Addition Addition Addition
Or registere familiar with SIGNATURE 12. IIILE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DP BASCUAS, ERNESTO 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DST POSE, MANUEL 4131 LAGUNA STREET	TION 607, 0505, F	DELETE DELETE	13. 1 T THE 12 NAME 1 2 NAME 1 3 STRE 2 CLAMM 2 3 STRE 2 4 CLAMM 3 3 STRE 3 4 CLAMM 4 1 THE 4 2 NAMM 4 3 STRE 4 CLAMM 5 STRE 4 CLAMM 5 STRE 4 CLAMM 5 STRE 5 T THE 5 T	EL ADDRESS -ST ZIP E EL ADDRESS -ST ZIP E EL ADDRESS -ST ZIP E EL ADDRESS -ST-ZIP E EL ADDRESS -ST-ZIP E EL ADDRESS -ST-ZIP E	e júlie e útitaj	HCERS AND D	Change Change Change Change	Addition Addition Addition
OF TEGISTERE SIGNATURE 12. ITTLE NAME. STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP	DP BASCUAS, ERNESTO 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DST POSE, MANUEL 4131 LAGUNA STREET	TION 607, 0505, F	DELETE DELETE	13. 1 T THE 12 NAME 1 2 NAME 1 3 STRE 2 CLAP 2 STRE 2 CLAP 3 STRE 2 CLAP 3 STRE 4 CLAP 4 STRE 4 CLAP 4 STRE 4 CLAP 5 STRE 5 STRE 5 STRE 5 STRE 6 STRE	EL ADDRESS -ST ZIP E E	e júlie e útitaj	HCERS AND D	Change Change Change Change	Addition Addition Addition
OF TEGISTERE SIGNATURE STREET ADDRESS CHY-SY-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS	DP BASCUAS, ERNESTO 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DST POSE, MANUEL 4131 LAGUNA STREET	TION 607, 0505, F	DELETE DELETE	13. 1 1 TULE 1 2 NAME 1 3 STRE 2 1 CUTY 2 1 TULE 2 2 NAME 2 3 STRE 2 4 CUTY 3 1 TULE 3 2 NAME 3 4 CUTY 4 1 TULE 4 2 NAVE 4 3 STRE 4 2 NAVE 4 3 STRE 5 1 TULE 5 2 NAME 5 3 STRE 5 1 TULE 5 2 NAME 5 3 STRE 5 1 TULE 5 2 NAME 5 3 STRE 5 1 TULE 5 2 NAME 5 3 STRE 5 5 STRE 5	EL ADDRESS -ST ZIP E E E EL ADDRESS -ST ZIP E E E E E E E E E E E E E E E E E E E	e júlie e útitaj	HCERS AND D	Change Change Change Change	Addition Addition Addition
OF TEGISTERE SIGNATURE 12. IIILE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP	DP BASCUAS, ERNESTO 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DST POSE, MANUEL 4131 LAGUNA STREET	TION 607, 0505, F	DELETE DELETE DELETE	13. 1 1 TULE 1 2 NAME 1 3 STRE 2 1 CUTY 2 1 TULE 2 2 NAME 2 3 STRE 2 4 CUTY 3 1 TULE 3 2 NAME 3 4 CUTY 4 1 TULE 4 2 NAVE 4 3 STRE 4 2 NAVE 4 3 STRE 5 1 TULE 5 2 NAME 5 3 STRE 5 1 TULE 5 2 NAME 5 3 STRE 5 1 TULE 5 2 NAME 5 3 STRE 5 1 TULE 5 2 NAME 5 3 STRE 5 5 STRE 5	EL ADDRESS -ST ZIP E EL ADDRESS -ST ZIP E EL ADDRESS -ST ZIP E EL ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E	e júlie e útitaj	HOERS AND D	Change Change Change Change	Addition Addition Addition
OF TEGISTERE FAITH ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DP BASCUAS, ERNESTO 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DST POSE, MANUEL 4131 LAGUNA STREET	TION 607, 0505, F	DELETE DELETE	13. 1 1 TULE 12 NAME 13 STRE 14 CUY 2 1 TULE 22 NAME 23 STRE 24 CUY 3 1 TULE 32 NAME 34 CUY 4 1 TULE 42 NAVE 43 STRE 44 CUY 5 1 TULE 52 NAME 53 STRE 54 CUY 55 NAME 56 CUY 64 CUY	EL ADDRESS -ST ZIP E E EL ADDRESS -ST ZIP E E E E E E E E E E E E E E E E E E E	e júlie e útitaj	HOERS AND D	Change Change Change Change	RS IN 12 Addition Addition Addition Addition
OF FEGISTERS OF THE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BASCUAS, ERNESTO 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DVP MARTINEZ, ROBERTO M. 4131 LAGUNA STREET CORAL GABLES FL DST POSE, MANUEL 4131 LAGUNA STREET	TION 607, 0505, F	DELETE DELETE DELETE	13. 1 T TUTE 12 NAME 13 STRE 14 COLY 2 STRE 24 COLY 3 T TUTE 32 NAME 34 COLY 4 T TUTE 42 NAME 44 COLY 53 STRE 54 COLY 53 STRE 54 COLY 6 T TUTE 64 NAME 54 COLY 6 T TUTE 64 NAME 54 COLY 64 COLY 65 NAME 54 COLY 66 T TUTE 66 NAME 66 T TUTE 67 NAME 66 T TUTE 66 NAME 66 N	EL ADDRESS -ST ZIP E E EL ADDRESS -ST ZIP E E E E E E E E E E E E E E E E E E E	e júlie e útitaj	HOERS AND D	Change Change Change Change	RS IN 12 Addition Addition Addition Addition

2ff-SI-ZIP
14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further to hereby certify that the information instrated on this annual application of the supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information instrated on this annual application of the corporation of 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 6 pick 13 if changed, these pick attachment with an address.

SIGNATURE:

TURE NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-96 305-446-1165

CR2E034 (12/95)