FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1007



FLORIDA DEPARTMENT OF STATE

FILED

Apr 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	1997							
DOCUI 1. Corporatio DIACO I	MENT # K19896 INC.	S (5)					1811 81811 81811 1881	
Deinate al Dian	a of Duringer	Mailing Audress				Bibli 91811 Bibli 8	ADIN DAANI BIBIN IDAA	
Principal Place of Business		Mailing Address				;		
1407 CORAL V		1407 CORAL WAY MIAMI FL 33145-2874						
MIAMI FL 3314 US	5	US						
03		00	1		3. Date Incorporated or Qualified	3a Dato o	Last Report	
			- 1		04/01/1988	05/01/1		
2. Principal P	Place of Business	2a, Mailing Address		···	4. FEI Number		Applied For	
21	tabe of Boomers	26			65-0040446		Not Applicab	<u></u>
Suite, Apt.	# etc	Suite, Apt. #, etc.			00 0010110		8.75 Additional	Ю
22	,, 5,0	27			Certificate of Status Desired	□ •	Fee Required	
City & Stat	e	City & State			A Floation Consider Figure			_
23		28	•		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
Zip	Country	Zip	Countr					
<u> </u>	· · · · · · · · · · · · · · · · · · ·	- ├── `		у	8. This corporation has liability for	Tres N		
24	25 9. Name and Address of Curren	29	30		Florida Statutes 10. Name and Address of New Re			
BIA.		it negistered Agent	81	Name	10. Name and Address of New No	ihieraran what	11.	-
	Z, PAULINO		"	TYDITIO				
	7 CORAL WAY		62	Street Ad	dress (P.O. Box Number is Not Accepta	ble)		
MA	MI FL 33145		_					
			83					
			84	City		85	Zip Code	
			"	Oity		FL 🏻	2.00000	
office or r agent. I a SIGNATURE	registered agent, or both, in the State im familiar with, and accept the obligation Signature, typed or printed hand of registered age.				proration submits this statement for the ation's board of directors. I hereby acce	pt the appointm	nent as registered	_
12,	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFI		RECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE				Change Addition	— Эп
NAME	DIAZ, PAULINO		1.2 NAME				- –	
STREET ADDRESS	1407 CORAL WAY			T ADDRESS				
) '	MIAMI FL		1	ĺ				
CITY-ST-ZIP	VD	DELETE	1.4 CITY - S 2.1 TITLE	S1-ZIP			Change	n
TITLE	DIAZ, ODALYS P	otter		ļ		' ليبا	Juliuse Acomo	л
NAME			2.2 NAME					
Street Adoress	1407 CORAL WAY		2.3 STREET	T ADDRESS				
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-	ST-ZIP				
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NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	T ADDRESS				
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TITLE		DELETE	4.1 TITLE				Change 🔲 Additio	'n
NAME			4. 2 NAME					
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CITY-ST-ZIP			4.4 CITY - 9					
TITLE		DELETE	5.1 THILE	1			Change	n On
NAME			5.2 NAME	1		- -		
STREET ADDRESS			5.3 STREET	r Annaree				
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						ال	Survide [7] MO3[[In	n I
NAME	_		6.2 NAME					
STREET ADDRESS	l		■ 6.3 STREET	FADDRESS				

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 angual report or symplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of the receiver or trustoe empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 \(\text{Chapter} \) Chapter 607, Florida Statutes; and that my name

CALATURE. SIGNALLY & GROWING

CITY-ST-ZIP