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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**FILED** Feb 18 1997 8:00am Secretary of State

Principal Place of Business  2299 N.W. 25TH AVENUE MIAMI FL 33142  Mailing Address  2299 N.W. 25TH AVENUE MIAMI FL 33142-7122								
					3. Date incorporated or Qualifie 06/14/1988		te of Last R	eport
2. Principal P	Place of Business	2a. Mailing Addre	ss		4. FEI Number	00/0		oplied For
1]		26			65-0054790		No	ot Applicable
Suite, Apt	#, etc.	Suite, Apt. #,	etc.		5. Certificate of Status Desired		\$8.75	Additional equired
2 City & Stat	te	City & State			6. Election Campaign Financing			Мау Ве
3	•	28			Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Ţ	Country	8. This corporation has liability		tax under s	
4	25	29	3	0	Florida Statutes	Yes [		<del> </del>
	9. Name and Address of Cu	irrent Registered Agent		81 Name	10, Name and Address of New	Registered A	gent	
	Z, MARCOS							
	9 N.W. 25TH AVENUE MI FL 33142			82 Street	Address (P.O. Box Number is Not Accep	otable)		
MIA	WI FL 33142			83				<del></del>
				\ <u>-</u>			Table 4	~
				84 City		FL	85 Zip	Code
	registered agent, or both, in the s am familiar with, and accept the o	State of Florida. Such chan obligations of, Section 607.	a Statutes, ge was aut )505, Floric	, the above-hamed thorized by the corpida Statutes.	corporation submits this statement for the poration's board of directors. I hereby ac	e purpose or	ointment as	registered
SIGNATURE	Signature, typod or pratice name of registere	ed agent and title if applicable.	(NOTE: F	Registered Agent signature	corporation submits this statement for the poration's board of directors. I hereby act required when renstating)  ADDITIONS/CHANGES TO O	DATE FFICERS AND	DIRECTO	RS IN 12
SIGNATURE  12.  Inde	Signature, typod or printic name of registers OFFICERS	ed agent and title it applicable.	(NOTE: F	Registered Agent signature 13. 1.1 TITLE	required when reinstating)	DATE FFICERS AND		
SIGNATURE  12.  THE  NAME	Signature, typoid or praise name of registere OFFICERS  VP BLANCO, JUAN	ed agent and title if applicable.	(NOTE: F	tegistered Agent signature 13. 1.1 TiTLE 1.2 NAME	required when reinstating)	DATE FFICERS AND	DIRECTO	RS IN 12
SIGNATURE  12.  TITLE  NAME  STREET ADURESS	Signature, typoid or praise name of registere OFFICERS  VP BLANCO, JUAN 2299 NW 25 AVE	ed agent and title if applicable.	(NOTE: F	registered Agent signature  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS	required when reinstating)	DATE FFICERS AND	DIRECTO	RS IN 12
SIGNATURE  12. THE NAME SIREET ADDRESS CITY-ST-ZIP	Signature, typoid or praise name of registere OFFICERS  VP BLANCO, JUAN	ed agent and title if applicable.	(NOTE: F	tegistered Agent signature 13. 1.1 TiTLE 1.2 NAME	required when reinstating)	DATE FFICERS AND	DIRECTO	RS IN 12
SIGNATURE  12.  TITLE  NAME  SIREET ADURESS  CITY-ST-ZIP  TITLE	Signature, typoid or praise name of registers OFFICERS  YP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL	ed agent and title I applicable.  S AND DIRECTORS  DE	(NOTE: F	Registered Agent signature  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST-ZIP	required when reinstating)	DATE FFICERS AND	DIRECTOI Change	RS IN 12
SIGNATURE  12.  THE  NAME  SIREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	Signature, typied or praise name of registers  VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS 2299 NW 25 AVE	ed agent and title I applicable.  S AND DIRECTORS  DE	(NOTE: F	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	required when reinstating)	DATE FFICERS AND	DIRECTOI Change	RS IN 12
SIGNATURE  12.  TITLE  NAME  SIREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	Signature, typoid or praise name of registers OFFICERS VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS	ed agent and title if applicable.  S AND DIRECTORS  DE	(NOTE: F LETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	required when reinstating)	DATE FFICERS AND	DIRECTOI Change	RS IN 12 Addition
SIGNATURE  12.  THE  NAME  SIREET ADDRESS  CITY-ST-ZIP  THE  NAME  STREET ADDRESS  CITY-ST-ZIP  THE	Signature, typied or praise name of registers  VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS 2299 NW 25 AVE	ed agent and title I applicable.  S AND DIRECTORS  DE	(NOTE: F LETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE	required when reinstating)	DATE FFICERS AND	DIRECTOI Change	RS IN 12 Addition
SIGNATURE  12.  THE  NAME  SIREET ADDRESS  CITY-ST-ZIP  THLE  NAME  STREET ADDRESS  CITY-ST-ZIP  THLE  NAME	Signature, typied or praise name of registers  VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS 2299 NW 25 AVE	ed agent and title if applicable.  S AND DIRECTORS  DE	(NOTE: F LETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME	required when reinstating)	DATE FFICERS AND	DIRECTOI Change	RS IN 12 Addition
SIGNATURE  12. THE NAME SIREET ADDRESS CHY-ST-ZIP THE NAME STREET ADDRESS CHY-ST-ZIP THE NAME STREET ADDRESS STREET ADDRESS	Signature, typied or praise name of registers  VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS 2299 NW 25 AVE	ed agent and title if applicable.  S AND DIRECTORS  DE	(NOTE: F LETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	required when reinstating)	DATE FFICERS AND	DIRECTOI Change	RS IN 12 Addition
SIGNATURE  12.  THE  NAME  STREET ADDRESS  CITY- ST-ZIP  THLE  NAME  STREET ADDRESS  CITY- ST-ZIP  THLE  NAME  STREET ADDRESS  CITY- ST-ZIP  THLE  NAME	Signature, typied or praise name of registers  VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS 2299 NW 25 AVE	ed agent and bile il applicable.  S AND DIRECTORS  DE	(NOTE: F LETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	required when reinstating)	DATE FFICERS AND	DIRECTOI Change Change	RS IN 12 Addition Addition
SIGNATURE  12. THE NAME STREET ADDRESS CHY-ST-ZIP THE NAME STREET ADDRESS CHY-ST-ZIP THE NAME STREET ADDRESS CHY-ST-ZIP THE	Signature, typied or praise name of registers  VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS 2299 NW 25 AVE	ed agent and title if applicable.  S AND DIRECTORS  DE	(NOTE: F LETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	required when reinstating)	DATE FFICERS AND	DIRECTOI Change	RS IN 12
SIGNATURE  12.  THE  NAME  SIREET ADDRESS  CHY-ST-ZIP  THE  NAME  STREET ADDRESS  CHY-ST-ZIP  THUE  NAME  STREET ADDRESS  CHY-ST-ZIP  THE  NAME	Signature, typoid or praise name of registers  OFFICERS  VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS 2299 NW 25 AVE MIAMI FL MIAMI FL	ed agent and bile il applicable.  S AND DIRECTORS  DE	(NOTE: F LETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	required when reinstating)	DATE FFICERS AND	DIRECTOI Change Change	RS IN 12 Addition Addition
SIGNATURE  12.  THE  NAME  STREET ADDRESS  CHY-ST-ZIP  THE  NAME  STREET ADDRESS  STREET ADDRESS	Signature, typoid or praise name of registers  OFFICERS  VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS 2299 NW 25 AVE MIAMI FL MIAMI FL	ed agent and bile il applicable.  S AND DIRECTORS  DE	(NOTE: F LETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	required when reinstating)	DATE FFICERS AND	DIRECTOI Change Change	RS IN 12 Addition Addition
SIGNATURE  12.  Inte  Name  Street address  City-St-Zip  Title  Name  Street address  City-St-Zip  Inte	Signature, typoid or praise name of registers  OFFICERS  VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS 2299 NW 25 AVE MIAMI FL MIAMI FL	ed agent and bile il applicable.  S AND DIRECTORS  DE	(NOTE: F LETE LETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	required when reinstating)	DATE FFICERS AND	DIRECTOI Change Change	RS IN 12 Addition Addition
SIGNATURE  12.  Title  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Signature, typoid or praise name of registers  OFFICERS  VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS 2299 NW 25 AVE MIAMI FL MIAMI FL	ed agent and bile il applicable.  AND DIRECTORS  DE  DE	(NOTE: F LETE LETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	required when reinstating)	DATE FFICERS AND	DIRECTOI Change Change Change	RS IN 12 Addition Addition Addition
SIGNATURE  12.  Title  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	Signature, typoid or praise name of registere OFFICERS  VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS 2299 NW 25 AVE MIAMI FL	ed agent and bile il applicable.  AND DIRECTORS  DE  DE	(NOTE: F LETE LETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	required when reinstating)	DATE FFICERS AND	DIRECTOI Change Change Change	RS IN 12 Addition Addition Addition
SIGNATURE  12.  THE  NAME  SIREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS	Signature, typoid or praise name of registere OFFICERS  VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS 2299 NW 25 AVE MIAMI FL	Ed agent and bile I applicable.  S AND DIRECTORS  DE  DE	(NOTE: F LETE LETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	required when reinstating)	DATE FFICERS AND	DIRECTOI Change Change Change Change	RS IN 12 Addition Addition Addition Addition
SIGNATURE  12.  TITLE  NAME  SIREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typoid or praise name of registere OFFICERS  VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS 2299 NW 25 AVE MIAMI FL	ed agent and bile il applicable.  AND DIRECTORS  DE  DE	(NOTE: F LETE LETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	required when reinstating)	DATE FFICERS AND	DIRECTOI Change Change Change	RS IN 12 Addition Addition Addition
SIGNATURE  12.  THE  NAME  SIREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS	Signature, typoid or praise name of registere OFFICERS  VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS 2299 NW 25 AVE MIAMI FL	Ed agent and bile I applicable.  S AND DIRECTORS  DE  DE	(NOTE: F LETE LETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	required when reinstating)	DATE FFICERS AND	DIRECTOI Change Change Change Change	RS IN 12 Addition Addition Addition Addition
SIGNATURE  12.  Thile  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Signature, typoid or praise name of registere OFFICERS  VP BLANCO, JUAN 2299 NW 25 AVE MIAMI FL P RUIZ, MARCOS 2299 NW 25 AVE MIAMI FL	Ed agent and bile I applicable.  S AND DIRECTORS  DE  DE	(NOTE: F LETE LETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE	required when reinstating)	DATE FFICERS AND	DIRECTOI Change Change Change Change	RS IN 12 Addition Addition Addition Addition

I have been been a supplemental annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 iffchanged, or on an attachment with an address.