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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K41095

(6)

Y & A PROFESSIONAL SERVICE, INC.

FILED Mar 12 1997 8:00am Secretary of State



·				1			
4995 N.W. 72 AVENUE SUITE 201 MIAMI FL 33168 2. Principal Place of Business		4995 N.W. 72 AVENUE Suite 201 Miami Fl 33168-5643					
					3. Date Incorporated or Qualified 10/25/1988	3a. Date of Last Report 03/25/1996	
		2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied For
21		26			65-0081776		Not Applicable
Suite, Apt. #, etc. 22		27			5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State	0	City & State			Election Campaign Financing Trust Fund Contribution		5.00 May Be
Z o 24	Country 25	Zip 29	Country 30			Yes No	der s. 199.032,
	9. Name and Address of C	urrent Registered Agent		····	10. Name and Address of New Reg	istered Agent	
	AMILLO, YOLANDO.		81 N	ame			
	i s.w. 122 avenue Te 201		82 St	treet Address	s (P.O. Box Number is Not Acceptable	e)	
MIAI	VII FL 33174		83				
			84 Ci	ity		FL 85	Zip Code
agent rai	m tamiliar with, and accept the o	obligations of, Section 607.0505, F	·lorida Statutes.				
SIGNATURE	Suporters type for printed hank of regiver	red agent and tide it applicable (NC	OTE Registered Agent sig	gnature required w	then reinstating)	DATE	
	OFFICERS	red agent and title it applicable (NC SIANO DIRECTORS	OTE Registered Agent sig	gnature required w	when reinstating) ADDITIONS/CHANGES TO OFFICE		CTORS IN 12
	OFFICERS PD			gnature required w	- ·		
12.	PD JARAMILLO, YOLANDO.	S AND DIRECTORS	13.	gnature required w	- ·	ERS AND DIRE	
12.	PD JARAMILLO, YOLANDO. 1501 S.W. 122 AVE., #1	S AND DIRECTORS	13. 1.1 TITLE		- ·	ERS AND DIRE	
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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 3 if changed, or on an attachment with an address.

SIGNATURE

TURE AND TYPEOUR REINTEO NAME OF SIGNING OFFICER OF DIRECTOR

1/7/97

Daytime Phone #