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

DOCUMENT # K51717

(2)

	E PROFESSIONAL CORP							
Principal Place 8055 CORAL WI MIAMI FL 33155	AY	Mailing Address 8055 CORAL WAY MIAMI FL 33155-1262						
						3. Date Incorporated or Qualified 12/15/1988	3a. Date of Last F 11/20/1996	Report
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number	·	pplied For
Suite, Apt. 4	H. into	Suite, Apt. #, etc.				65-0094655		ot Applicable
ouile, Apc. 1	#, etc	27 Solle, Apr. #, etc.				5. Certificate of Status Desired	7	Additional equired
City & State	9	City & State				6. Election Campaign Financing	\$5.00	May Be
3		28				Trust Fund Contribution		to Fees
Zip T	Country	Zip	Coun	try		8. This corporation has liability for in	_ ~	s. 199 .032,
4	25 9, Name and Address of Curr	29 ent Registered Agent	30			Florida Statutes 10. Name and Address of New Reg	Yes No	
I FF	ROGELIO	ent riegistores Agent		31 Nar	ne	10, value and near or their ter	grotorou ragorit	
	CORAL WAY			32 Stre	ot Addre	ess (P.O. Box Number is Not Acceptab	lo)	
	AI FL 33155		[JA SIIC	et Addre	Sas (1 ,O: Dox Humber is 140t Acceptab		
			8	33				
			Įε	34 City			85 Zip	Code
							FL	
agent. Lar	egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such change was igations of, Section 607.0505, Fl	authorized orida Statu	by the d tes.	orporation	oration submits this statement for the p on's board of directors. I hereby accep	ot the appointment as	registered
SIGNATURE.	Signature: typen or printed name of registered in	agent and the if applicable (NO	TE Registered	Agent sign:	ture require	ed when rainstaing)	DATE	-
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		
TITLE	PSO	DELETE	1.1 T(TL		Ì		L Change	Addition
NAME	LEE, ROGELIO 7900 S.W. 139 TERR.		1.2 NAN		0.0			
STREET ADDRESS CITY - ST - ZIP	MIAMI FL 33158		1	EET ADDRE	55			
TITLE	1412 2141 1 2 4 4 1 4 4	······································		1.4 CITY~ST-ZIP 2.1 TITLE			Change	Addition
NAMÉ	•		2.2 NAN	NE:				
STREET ADOPESS			2 3 STR	EET ADDRE	SS			
CITY+SI-7IP			2 4 011	Y - ST - ZIP				
HTLE		DELETÉ	31 TITL		ļ		7 L. Change	Addition
NAME			3.2 NAN					
STREET ADDRESS				EET ADDRE Y - ST - ZIP	55			
CITY-ST-ZP TITLE		DELETE	4.1 T(TL				Change	Addition
NAME			4. 2 NAI		1		. •	
STREET ADDRESS			4.3 STR	EET ADDRE	SS			
CITY-ST-ZIP			4.4 CITY	Y-ST-ZIP				
TITLE		DELETE	5.1 TITL	.E			Change	Addition
NAME			5.2 NAN					
STREET ADDRESS				EET ADDRE	SS			
CITY-ST-ZIP		DELETE	5 4 CITY 6 1 TITL	r-ST-ZIP		······································	Change	Addition
TITLE Name		ليا ميرداد	6 2 NAM		-		La Change	roundn
STREET ADDRESS				ric Eet addre	ss			
City - St - ZIP				Y-ST-ZIP	1			
14. I do hereb			ify for the e	exemption		in Section 119.07(3)(i), Florida Statute		
Lam an of	in indicated on this annual report of fficer or director of the corporation in Block 12 or Block 13 if chapped,	or the receiver or trustee empoy	wered to ex	corate the	and that his report	my signature shall have the same lega t as required by Chapter 607, Florida S	it effect as it made un statutes; and that my	name

SIGNATURE:

NORE AND VIEW OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-97 (30) 261-3834

FILED

Jan 17 1997 8:00am

Secretary of State

Thome #

2E034 (9/96)