P CORF ANNU	PROFIT CORPORATION ANNUAL REPORT  1996		FLORIDA DEF Sandr Secre	PARTMENT OF STATE a B. Mortham stary of State F CORPORATIONS		
DOCUN 1. Cogardatun ZAVAS		K94043	3 (2)		( 186/8))) ( 18 (8))) ( 18)) ( 18))	SOA JINI SIAN OYDNI OYDNI OYDNI AYSNI OYDNI STAN
Nuincipal Place 8262 NW 58 S MIANU FL 3319	STREET		Mailing Address 8262 NW 58 STREET MINUN FL 33166			
US \			US		3. Date Incorporated or Qualified 06/06/1989	3a. Date of Last Report 04/03/1995
2. Principal Plac rt   <b>8323</b> Suite, Apt. #	hw 60	ast.	2a. Mailing Address 26 8323 No. 126 Suite, Apt. #, etc.	w 64st.	4. FEI Number 65-0124306	Applied For Not Applicable
City & State			City & State		Certificate of Status Desired     Election Campaign Financing	\$8.75 Additional Fee Required
al Hin	and the second s	C	28] <b>UI LUI</b>	F C .	Trust Fund Contribution	\$5.00 May Be Added to Fees
ها 33 <del>ا</del> آه	66 [25]	DADE ddress of Current	29 33166	30 DIDE	8. This corporation has liability for Florida Statutes Ye.  10. Name and Address of New	es <b>X</b> INo
GARZON 8323 N.V MIAMI FL	v. <b>6</b> 4th st	0		83	Address (P.O. Box Number is Nr. Accept 323 NW 605	es 7/n Code
SIGNATURE	and Coept (19)	agations of, Section	1 607.0505, Florida Statute	ites, the above-named co zed by the corporation's s.	rporation submits this statement for the popular of directors. I hereby accept the ap	FL   33766 urpose of changing its registered office pointment as registered agent. I am O2-/4-96
	it purfore i typed or printe it	namic of registered agent an OFFICERS AND	DIRECTORS	OTE Hagistered Agent signature re		FICERS AND DIRECTORS IN 12
TITLE NAME STREET ACORESS	PS' GARSON, JU 8323 NW 64T		☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	Carlos Guino 8323 NW 643	nD. Change Addition
CITY ST ZIP BILLE NAME STREET ADDRESS	MIAMI FL VD GALVEZ, ALV 8262 NW 58		[] DELEIE	1.4 CITY - ST - ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS	NONE	3/66. Change Addition
OTY STIZE THUE NAME STRIET ACORESS OTY STIZE	MIAMI FL		C] DETELE	2 4 CHY- ST- 2IP 3 1 THE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY- ST- ZIP		☐ Change ☐ Addition
THE NAME SIME-LADDRESS CITY STIZE			☐ DELETE	4 1 TITLE 4 2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP		Change Addition
THIF NAME SEREFI ADDRESS CIY STIZE			DELETE	5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST- ZIP		☐ Change ☐ Addition
T IUF NAM:			[] DELETE	6 1 TITLE 62 NAME 63 STREET ADDRESS		☐ Change ☐ Addition
SPRE: LADDRESS	certify that the info	ormation supplied wit	<u></u>	6.4 CITY-ST-ZIP	lify for the exemption stated in Section 11	