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 # L00143

(2)

J.L.C. ACCOUNTING SERVICES, INC.

FILED
May 15 1997 8:00am
Secretary of State



Principal Place of Business 8585 SUNSET DR 130************************************		Mailing Address 8585 SUNSET DR 130 MIAMI FL 33143-3746	8585 SUNSET DR 130 MIAMI FL 33143-3748		1 100 110 W 64 20 11 20 10 10 10 10 10 10 10 10 10 10 10 10 10			
US		US			3. Date Incorporated or Qualified 07/06/1989	3a. Date o 05/01/	f Last Re 1996	port
	lace of Business	2a. Mailing Address		***************************************	4. FEI Number 65-0130515			plied For
Suite, Apt	#. elc	Suite, Apt. #, etc.	····			<u> </u>		t Applicable additional
22		27			5. Certificate of Status Desired		Fee Re	
City & Stat	te	City & State		··-·	6. Election Campaign Financing		\$5.00	May Be
23		28			Trust Fund Contribution		Added t	
Zip ≣∃	Country	Zip	Country	<i>†</i>	8. This corporation has liability for in	ntangible tax i	under s.	199.032,
24	25 9. Name and Address of Curr	29 29 Agent	30		Florida Statutes 10, Name and Address of New Reg			
	RRALES, JOSE LUIS	on neglatored Agent	61	Name	10, Hante and Addises of How Hel	haraida Agai		
	5 SW 128 AVE		<u></u>					
MIAMI FL 33175			82	82 Street Address (P.O. Box Number is Not Acceptable)				
****			83					
				0			- 7:- /	
			84	City		FL 8	5 Zip (ode
SIGNATURE.	Styrvature, typicd or printed name of registered			ent signature requ	ked when reinstating)	DATE		
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			
TOUE	CORRALES, JOSE LUIS	L DELETE	1.1 TITLE	ł		اسا	Change	Addition
NAME STREET ADDRESS	4625 SW 128 AVE		1,2 NAME	T ADDRESS				
CITY-ST ZIP	MIAMI FL		1.4 CITY-1					
THILE		DELETE	2.1 TITLE	51-III			Change	Addition
NAME			2.2 NAME	1	1		·	
STREET ADDRESS	1		2.3 STREE	T ADDRESS				
CITY-\$1-7+*								
1014			2 4 CiTY-	ST-ZIP				
	1	DELETE	3 1 TITLE	ST-ZIP			Change	Addition
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4. 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 annual report is supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that have no 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 if chapged, or on any attachment with an address.

SIGNATURE AND A PARTIE SIGNATURE AND A PARTIE

3-10-97

(305) 59P-5-14

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