## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

L07752

(3)

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Principal Place of Business Mailing Address							)		il 2020 BIBN <b>Die</b> l	B B   B B     <del> </del> B	
12342 S.W. 132CT MIAMI FL 33186			7900 SW 165TH STREET 12342 S.W. 132CT		ī						
US			MIAMI FL 33186 US		08/03/1989			a. Date of Last Report 03/10/1995			
2. Principa¹ Pla	ce of Business	F1	. Mailing Address	e ,	· 7	<b>4.</b> F	El Number		h	Applied For	
21   Suite, Apt. #	etc.	26	/23/2 5 Suite. Apt. #, etc.	>.W /	3261		65-0195569		والمعجم المناج والمتحدد	Not Applicable Additional	
22	, 610	27	00 to Apr. 4, etc.			5. 🤇	Dertificate of Status Desired	×	,	Required	
City & State		- +=:.1	City & State			<b>6</b> . E	Lection Campaign Financing		\$5.0	O May Be	
23		28	MIAMI	F/·			rust Fund Contribution	L		d to Fees	
Zip	Country	Ţ,	Zip	Ccc	ountry		his corporation has liability for			199.032	
24	25	29	32186	30	<i>US</i>	L		s 🗌 No			
	9. Name and Address of Curren	Regis	stered Agent		81 Name	10. 1	Name and Address of New	Registeri	e Agent		
045044	ENDIOLIE										
	, enrique S.W. 132CT				82 Street Add	dress (P.O	), Box Number is Not Accepta	ble)			
	EL 33186				83						
MINAMI I	2 33 100				84 City				Jeel 7.	- Code	
					84 City			F	EL  85   Zip	o Code	
SIGNATURE	OFFICERS AN			13 1 1	TILE 2	<b>D</b> •	STATES	DATE FICERS A		DRS IN 12	
	GARCIA, ENRIQUE E.						Leurique E. Sau mateo st	•			
STREET ADDRESS CITY-ST-ZIP	<del>-7300 SW 165TH STREET</del> MIAMI FL				STREET ADDRESS   #   City-Se-zip	SUSU	605/65 F/. 37				
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NAME				6.2	NAME						
STREET ADDRESS				6.3	STREET ADDRESS						
CITY - ST - ZIP					CITA-ST SID	4		0.775.7	Fill Salt As 1811		
certify that oath, that I	certify that the information supplied the information indicated on this arm am an officer or director of the corps Block 12 or Block 13 if changed, or o	iał repo ration c	ort or supplemental a or the receiver or trus	innua! repor stee empow	t is true and accur	ate and th	hat my signature sha'l have the	e same le	gal effect as if	f made under	

SIGNATURE:

SIGNATURE AND TYPED OR CRUNTED NAME OF SIGNING DESIGNATION OF DIRECTOR

4/11/96 (305) 253-2231

CR2E034 (12/9