FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	Jal report — (1997	Secretary of State DIVISION OF CORPORATIONS			Secretary of State			
	MENT # L29 CH CORPORATION	103 (3)	J 1.17		- 180) W 100 1		8161L 1811	
Principal Place of Business 201 S.W. 6 STREET MIAMI FL 33130 US		Mailing Address 201 SW 6TH ST MIAMI FL 33130-2910	201 SW 6TH ST					
00					3. Date Incorparated or Qualified 11/13/1989	3a. Date of Last F 05/01/1996	Report	
	face of Business	2a. Mailing Address			4. FEI Number	├├	pplied For	
Suite, Apl	at este	Suite Ant # etc	Suite, Apt #, etc.		65-0155563	CQ 75	ot Applicable Additional	
22	w, v-150-	├ -	27		5. Certificate of Status Desired		equired	
Oity & Stat	₹	City & State			Election Campaign Financing Trust Fund Contribution		May Be to Fees	
7ip	Country	Zip	Country	/	8. This corporation has liability for			
24	25 29 30				Florida Statutes 🔀 Yes 🗌 No			
		of Current Registered Agent	81	T 51	10. Name and Address of New Re	gistered Agent		
	ES, PEDRO		81	Name				
2530 S.W. 115TH AVENUE MIAMI FL 33142			82	Street Ad	dress (P.O. Box Number is Not Acceptat	ole)		
MIN	MI FL 33142		83	-,-,-	**************************************			
			84	Dit.		last 2:-	Code	
]		FL	Code	
11. Pursuant office or i	to the provisions of Section registered agent, or both, in	s 607 0502 and 607,1508, Florida Statu the State of Florida, Such change was	ites, the abov authorized b	e-named co y the corpo	orporation submits this statement for the pration's board of directors. I hereby accept	ourpose of changing i	ts registered registered	
agent 1a	arii faniifiar with, and accept	the obligations of, Section 607.0505, F	lorida Statute	S.			_	
SIGNATURE	Sognoreer type door printed mand tiff to	ogratimo agent and title if applicative (NO	TE Registered Ag	ent signature re	quired when reinstating)	DATE		
12.			13.		ADDITIONS/CHANGES TO OFFIC			
THE			1.1 TITLE			Change	Addition	
NAMÉ I	· · · · · · · · · · · · · · · · ·		1.2 NAME				,	
SIFEET ADORESS	AMASSI PI		4	ADDRESS				
City St 74°	MIAMI FL 14			ST-ZIP		Change	Addition	
NAME	22			1				
STREET AUDRESS	23:			T ADDRESS				
CHY 51-749			2, 4 CITY-	ST-ZIP			1.11.	
TIFLE	DELETE 31					Change	Addition	
NAM:			3.2 NAME				ļ	
STREET ADDRESS:				I ADDRESS				
CTY S1-20P TUTCE		DELETE	3.4. CITY - 4.1 TITLE	51 - ZIP		Change	Addition	
NAME		_	4. 2 NAME	1				
STREET ADDRESS			4.3 STREET	ADORESS				
CHY ST-7-1			4.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE		-	Change	Addition	
MAM!			5.2 NAME	t saparea				
STREET ADDRESS.			- 1	ADDRESS				
1114 - 51 - 71F 1114 F		DELETE	5.4 CITY - 5 6.1 TITLE	o1. Zir		☐ Change	Addition	
NAME			6.2 NAME		•	<u></u>		
SIRKET ADDRESS			6.3 STREET	ADDRESS	l			
É13∀ €1. 2/P	1		64 City-9	ST. 71P	1			

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and cated 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Brock 12 or Block 13 it planets of or an attachment with an address.

SIGNATURE:

FILED

Mar 27 1997 8:00am

3-24-97 305-8563777