• 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 # 1 22/12

111

FILED Apr 21 1997 8:00am Secretary of State

OK TR/		Mailing Address 4230 SW 947H AVE MIAMI FL 33165-5237	1				
				3. Date Inco 12/27/1	rporated or Qualified	3a. Date of Last 05/01/1996	
2. Principal	Principal Place of Business 2a. Mailing Address			4. FEI Numb	xer	<u> </u>	Applied For
1]	Supplies Assistant Supplies Assi			65-010	00092		Not Applicable
SU10; MP	Suite, Apt. #, etc. Suite, Apt. #, etc. 27		5. Certificate of Status Desired		of Status Desired	\$8.75 Additional Fee Required	
	City & State City & State		· · · · · · · · · · · · · · · · · · ·	6. Election (Sampaign Financing		May Be
3]	28			1	d Contribution		d to Fees
- Ир	Country	Zφ	Country		oration has liability for		r s. 199.032,
J	9. Name and Address of Curre	29 29 Apont	30	Florida Si	atutes d Address of New Re	Yes No	u/
	VAL, CARLOS	ent uedisteten wäent	81 Name			· 	
	30 SW BATH AVE	l I	TALLAY	M. Dov			
MIAMI FL 33165			82 Stree	1 Address (P.O. Box N	umber is Not Accepta		
****	*		83				,,
			84 City	· · · · · · · · · · · · · · · · · · ·		Test 7	- Cade
			84 City	miami		FL 85 2	p Code
IGNATURE 2. IU	Signature, 651ct or printed name of pylisteced a	igations of Section 607 405, Ingent and title if applicable (No. ND DIRECTORS	OTE: Registered Agent skynat. 13. 1.1 TITLE 1.2 NAME	ADDITION D-P.T.S	SICHANGES TO OFFI	Chang	
OFFEET ADDRESS	Anna fru a stu a se		1.3 STREET ADDRESS	امغاصا بناما	94 4 A	<i>i</i> e	
(Y-S1-ZIP	MJAMI FL.		1.4 CITY - ST - ZIP	miami		165	
LF	8//	DELETE	21 TITLE			Chang	e Addition
Mt	BOVAL, CARLOS		2.2 NAME				
HEET ADDRESS	4220 SW 94TH AVE		2.3 STREET ADDRESS				
Y - \$1 - ZIP	MIAMI FL		2. 4 CITY-ST-ZIP				
TLE		DELETE	3.† TITLE			Chang	e Addition
Mi			3.2 NAME				
TREET ADDRESS			3 3 STREET ADDRESS				
19 - ST - ZIP		DE PETE	34 CITY-ST-ZIP				- Taylor
lt f		☐ DELETE	4) TITLE			Chang	e Addition
kM!E			4. 2 NAME				
EEET ADORESS	S		4.3 STREET ADDRESS	1			
1 - ST ZIP		The section	4.4 CITY-\$1-ZIP	ļ. <u> </u>		— <u>— — </u>	. 200
LE	1	☐ DELETE	5.1 TITLE	1		Chang	e [_] Addition
MI.			5.2 NAME				
REET ADDRESS	5.		5 3 STREET ADDRESS	- [
V SI-7(2)			5.4 CITY-ST-ZIP				
I E	\	☐ DELETE	61 TITLE			☐ Chang	e 🔲 Addition
MAE	l		E CANALIC	I			
			62 NAME	1			
REFLADIOALSS	5		6.3 STREET ADDRESS	;			
IREET ADOALSS TY-IST-IZIP	5						

I have the same information of supplied with this little goes not quality for the exemption stated in Section 118.07(3)(f), Florida Statutes. Frunther certify that the information indicated 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 a rector 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 changed, or on an attachment with an address.

SIGNATURE:

0223364