

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

FILED

**Apr 28 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L38669 (2)

1. Corporation Name
FONTAINEBLEAU GAS & WASH, INC.



Principal Place of Business 8775 W FLAGLER ST MIAMI FL 33174-2417	Mailing Address 8775 W FLAGLER ST MIAMI FL 33174-2417
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3. Date Incorporated or Qualified 12/28/1989	3a. Date of Last Report 02/05/1996
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2. Principal Place of Business 21 7900 N.W. 36 ST.	2a. Mailing Address 26 7900 N.W. 36 ST.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State MIAMI, FL	28 City & State MIAMI, FL
24 Zip 33166	25 Country USA
29 Zip 33166	30 Country USA

4. FEI Number 65-0178453	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**LUIS ARIAS
8775 W FLAGLER ST
MIAMI FL 33174**

10. Name and Address of New Registered Agent

81 Name LUIS ARIAS
82 Street Address (P.O. Box Number is Not Acceptable) 7900 N.W. 36 ST.
83
84 City MIAMI
85 Zip Code FL 33166

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: **X** *Luis Arias* (NOTE: Registered Agent signature required when reinstating) **X** DATE: **4-21-97**

12. OFFICERS AND DIRECTORS

TITLE P	<input type="checkbox"/> DELETE
NAME ARIAS, LUIS	
STREET ADDRESS 8775 W. FLAGLER ST.	
CITY-ST-ZIP MIAMI FL	
TITLE V	<input type="checkbox"/> DELETE
NAME MORENO, ANTONIO	
STREET ADDRESS 8775 W. FLAGLER ST.	
CITY-ST-ZIP MIAMI FL	
TITLE S	<input checked="" type="checkbox"/> DELETE
NAME ARIAS, LUIS	
STREET ADDRESS 8775 W. FLAGLER ST.	
CITY-ST-ZIP MIAMI FL	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME LUIS ARIAS	
1.3 STREET ADDRESS 7900 N.W. 36 ST.	
1.4 CITY-ST-ZIP MIAMI, FL	
2.1 TITLE V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME ANTONIO MORENO	
2.3 STREET ADDRESS 7900 N.W. 36 ST.	
2.4 CITY-ST-ZIP MIAMI, FL	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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 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: **X** *Luis Arias* DATE: **4-21-97** 305-592-4884

CR2E034 (9/96)