## 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 # L52458

(1)

C.E. LESCHHORN & CO

FILED May 15 1997 8:00am Secretary of State



10701 S.W. 77T		Mailing Address						
10701 S.W. 77TH COURT C/O CARLOS E. LESCHHORN MIAMI FL 33156		10701 S.W. 77TH COURT C/O CARLOS E. LESCHHORN MIAMI FL 33156-3727					٠	
THE STREET STREET STREET	-				<ol> <li>Date Incorporated or Qualified 02/21/1990</li> </ol>	3a. Date of		Report
	ace of Business	2a. Mailing Address	٠٠٠	,	4. FEI Number			oplied For
	21 Sw 77 ar	26 POBOX	52 1107	<u> </u>	65-0178356		1 <i>3</i>	ot Applicable
Strite, Apt 4	#, €IC	Suite, Apl. #, etc.			5. Certificate of Status Desired			Additional equired
City & State	()	City & State		71	6. Election Campaign Financing	\$	5.00	May Be
	- Fla	28 KUAMI	Œ		Trust Fund Contribution			to Fees
210 24 331(C	Country Country 25 USG	29 3336-105	Counti	ry		Yes 🔀 No	)	199.032,
	9. Name and Address of Curre	nt Registered Agent	8	1 N-m-	10. Name and Address of New Re	glatered Ager	<u>t</u>	
	CHHORN, RODOLFO C		8	1 Name				
	01 S.W. 77TH COURT		8:	2 Street Ad	dress (P.O. Box Number is Not Acceptab	ole)		
MIAN	MI FL 33158-0727		8:	3		· · · · · · · · · · · · · · · · · · ·		
			8.	4 City		FL 85	Zip	Code
office or ro agent if ar	egistered aney', o both in the State m familiar v 19 ar hyco of the obli	of Florida. Such change w jurions of Section 607 0505	ras authorized to Florida Statut	by the corpores	orporation submits this stalement for the pration's board of directors. I hereby accept	ot the appointn	nent as	registered
SIGNATURE .	wan a				4	28-		
12.	Signature, typed or pointed case of registered ag OFFICERS AN	ID DIRECTORS	(NUTE: Registored A	gent signature red	uired when reinstating)  ADDITIONS/CHANGES TO OFFICE	ERS AND DIR	ECTO	RS IN 12
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I so need by certify that his find main in supplied with his limit does not qualify for the exemption stated in section (19.07,570, Florida Statutes, Further certify that information indicated on this annual report or supplemental annual report is true and excurate 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 this reserver or youstee 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 utility ment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-97

SOCGET9857 Daytime Phone I