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CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # L76749

(5)

DIELECT CORPORATION

Principal Place of Business 4806 NW 7TH ST.		Mailing Address	•						
4806 NW 7TH ST. 4806 NW 7TH ST. MIAMI FL 33126 MIAMI FL 33126-2102					·				
					3. Date incorporated or Qui 05/29/1990		Date of Last		
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address					Applied For	
21		26			65-0210699		<u> </u>	Not Applicable	
Suite Ap	: #, etc	Suite, Apt. #, etc.			5. Certificate of Status Desi	red 🔲		Additional Required	
City & Sta	ile	City & State			6. Election Campaign Finan	ncing		May Be	
23		28	T		Trust Fund Contribution		ebbA	d to Fees	
Ζφ	Country	Zip	Cou	ntry	8. This corporation has liab			s. 199.032,	
24	25 9. Name and Address of C	29 Current Registered Agent	[30]	·····	Florida Statutes 10. Name and Address of N	Yes		 	
Al A	ONSO, ANTONIO	January Control of Agent		81 Name	IV. Name and Address of P	an undherer	en waent		
	6 NW 7TH ST.								
	MI FL 33126			82 Street	Address (P.O. Box Number is Not Ad	cceptable)			
				83					
				84 City			85 Zi	p Code	
11. Pursuan	t to the provisions of Sections 60	07.0502 and 607.1508. Florida Stat	utes, the at	xove-named	corporation submits this statement for	or the purpos	e of changing	its registered	
othice or	registered agent, or both, in the	 State of Floridal Such change was obligations of Section 607,0505, I 	authorized	d by the cor	poration's board of directors. I hereb	y accept the	appointment a	as registered	
agcair	an a mia win, and accept the	doligations or Section 607,0005, I	ionua stati	Utes.					
SIGNATURE	Signature, typed or printed name of registe	ered agent and title if applicable (Ni	OTE: Registered	Apent signatur	a regulated when reinstating)	DAT	F		
	Signature, typica or printed name of registe OFFICEF	ered agent and title if applicable (NRS AND DIRECTORS	OTE: Registered	Agent signatur	required when reinstating) ADDITIONS/CHANGES TO	OAT OFFICERS		ORS IN 12	
12.					required when reinstating) ADDITIONS/CHANGES TO				
12. TITLE	OFFICEF PD	RS AND DIRECTORS	13.	LE			AND DIRECTO		
12. TITLE NAME	PD ALFONSO, RAFAEL	RS AND DIRECTORS	13. 1.1 Til 1.2 NA	LE			AND DIRECTO		
12. Title Name Siffeet address	PD ALFONSO, RAFAEL	RS AND DIRECTORS	13. 1.1 Til 1.2 NA 1.3 ST	LE ME REET ADDRESS			AND DIRECTO		
12. TITLE NAME STREET ADDRESS CHY-ST-ZIP	PD ALFONSO, RAFAEL 4806 NW 7TH ST.	RS AND DIRECTORS	13. 1.1 Til 1.2 NA 1.3 ST	LE ME REET ADDRESS IY - ST - ZIP			AND DIRECTO	e Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICER PD ALFONSO, RAFAEL 4806 NW 7TH ST. MIAM! FL 33126	AS AND DIRECTORS DELETE	13. 1.1 Til 1.2 NA 1.3 ST 1.4 Cil	LE ME REET ADDRESS IY - ST - ZIP LE			AND DIRECTO	e Addition	
12. Title Name Siveet address Chy-Si-Zip Title Name	PD ALFONSO, RAFAEL 4806 NW 7TH ST. MIAM! FL 33128 SD	AS AND DIRECTORS DELETE	13. 1.1 TiT 1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA	LE ME REET ADDRESS IY - ST - ZIP LE			AND DIRECTO	e Addition	
12. TITLE NAME STHELT ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS	PD ALFONSO, RAFAEL 4806 NW 7TH ST. MIAM! FL 33126 SD ALONSO, ANTONIO	AS AND DIRECTORS DELETE	13. 1.1 Til 1.2 NA 1.3 ST 1.4 Cil 2.1 Til 2.2 NA 2.3 STi	LE ME REET ADDRESS IY - ST - ZIP LE ME REET ADDRESS			AND DIRECTO	Addition	
TITLE NAME SCHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP CHY-ST-ZIP	PD ALFONSO, RAFAEL 4806 NW 7TH ST. MIAM! FL 33126 SD ALONSO, ANTONIO 4806 NW 7TH ST.	AS AND DIRECTORS DELETE	13. 1.1 Til 1.2 NA 1.3 ST 1.4 Cil 2.1 Til 2.2 NA 2.3 STi	LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP			AND DIRECTO	Addition Addition	
12. TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP	PD ALFONSO, RAFAEL 4806 NW 7TH ST. MIAM! FL 33126 SD ALONSO, ANTONIO 4806 NW 7TH ST.	AS AND DIRECTORS DELETE DELETE	13. 1.1 TiT 1.2 NA 1.3 ST 1.4 CiT 2.1 TiT 2.2 NA 2.3 STI 2.4 CI	LE ME REET ADDRESS IY-S1-ZIP LE ME REET ADDRESS TY-S1-ZIP LE LE TY-S1-ZIP LE			AND DIRECTO	Addition Addition	
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SIGNATURE 12. TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	OFFICER PD ALFONSO, RAFAEL 4806 NW 7TH ST. MIAMI FL 33126 SD ALONSO, ANTONIO 4806 NW 7TH ST. MIAMI FL 33126	DELETE DELETE DELETE DELETE	13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CIT 2.1 TIT 2.2 NA 2.3 STIT 2.4 CIT 3.1 TIT 3.2 NA 3.3 STIT 3.4 CIT 4.1 TIT 4.2 NA 4.3 STIT 4.4 CIT 5.1 TIT 5.2 NA 5.3 STIT 5.4 CIT 6.1 TIT 6.2 NA	LE ME REET ADDRESS IY-SI-ZIP LE MME REET ADDRESS IY-SI-ZIP LE ME REET ADDRESS IY-SI-ZIP LE ME REET ADDRESS IY-SI-ZIP LE			Change Change	Addition Addition Addition Addition	

SIGNATURE:

DIVECTOR OFFICER OR DIRECTOR

Daytime Phone #

FILED

Feb 14 1997 8:00am

Secretary of State

T KARPINEN DEN ERREIT GEREN GARRI GARRI DIOSO HARI BIDIN BITTI DISARI DIBRI DIORI BIDIN ERRO