## 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 # L78860

(8)

ALEXANDER H. COMPANIES INC.

FILED Feb 03 1997 8:00am Secretary of State



2. Principal Suite, Ap City & State	Place of Business	2a. Mailing Address 2b. Mailing Address 2c Suite, Apt. #, etc. 27 City & State			3. Date Incorporated or Qualified 06/07/1990 4. FEI Number 65-0224588 5. Certificate of Status Desired 6. Election Campaign Financing	\$5.	
Zip	Country	<b>28</b> Zip	Country	/	Trust Fund Contribution  8. This corporation has liability for in		
4	25	29	30			Yes No	
	9. Name and Address of Curren	it Registered Agent		т	10. Name and Address of New Reg	Istered Agent	
	ASTILLA, ALICIA M.		81	Name			
201 S. BISCAYNE BLVD.			82	82 Street Address (P.O. Box Number is Not Acceptable)			
SUITE 2000			63				
M	AMI FL 33131			<u> </u>			
			84	City		FL  85	Zip Code
SIGNATURE	Styriature, typical or printed harne of regulated age	enrand title if applicable (NC D DIRECTORS	TE Registered Ap	ent signature re	equired when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIREC	TORS IN 12
<b>12.</b> Tritt	D OFFICERS AND	DELETE	1.1 TITLE		MS	K Cha	
NAME	MARTINELLI, GUIDO		1.2 NAME		MANUEL COHEN		
STREET ADDRES	s 9300 NW 58 ST		1.3 STREE	T ADDRESS	9300 NW 58 St		
CITY-ST-ZIP	MIAMI FL		1.4 CITY -	ST-ZIP	Miami, Fl. 33178	1 1 2	<b>17</b> 1
TITLE	D	[] DELETE	2.1 T(TLE		V	☐ Cha	nge 🗶 Additio
NAME	MARINAKYS, JUAN C.		2.2 NAME		CHRISTOPHE FROCHAUX		
STREET ADDRES	s   9300 NW 58 ST   MIAMI FL		2.3 STREE 2.4 City	T ADDRESS	9300 N.W. 58 Street Miami. Fl. 33178		**************************************
CHY-SI-7:P	D	DELETE	31 THILE	· 51 - £IF	FITAILL, FIT. 33170	☐ Cha	nge Additio
NAME	CAPURRO, JUAN MIGUEL		3.2 NAME	.			
STREET ADDRES	JEAN DOMONTOLL AND MEAN		3.3 STREE	T ADDRESS			
CITY - \$1 - 20F	MIAMI FL		3.4. CITY				
TILLE	DC	[] DELETE	4.1 TITLE			L. Cha	inge 🛄 Additio
NAME	GARCIA, AUGUSTO 3105 N.W. 79TH AVENUE		4. 2 NAM				
STREET ADDRES	MIAMI FL			ET ADDRESS			
TITLE	MS MS	DELETE	4.4 CITY- 5.1 TITLE			☐ Cha	inge Additio
NAME	QUANT, EDUARDO		5.2 NAMI				
STREET ADDRES	ASSAULT OF OTDERT OF	200	5.3 STRE	ET ADDRESS			
CITY+ST-ZIP							
GITT 51-ZIF	MIAMI FL		5.4 CITY	ST-ZIP			
TITLE	MIAMI FL	DELETE	6.1 TITLE			☐ Ch	ange 🔲 Additio
TITLE NAME			6.1 TITLE 6.2 NAMI			☐ Ch	ange 🔲 Additio
TITLE			6.1 TITLE 6.2 NAMI	ET ADDRESS		☐ Ch	ange Additio

i. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(f), Profide Statutes. Floring supplemental annual report in supplemental annual report and in supplemental report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changing of on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRIMITED WAME OF SIGNING OFFICER OR DIRECTOR

1/23/97

(305) 593 5302

Daytime Finone #