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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	JAL REPORT 1997		Secretary of State DIVISION OF CORPORATIONS			Secretary of State			
	MENT # M0058	35 (3)							
LAW FIRM, INC.									
						H I RANGANI ANI ARNIH BANGA BANGA I ANI ANI ANI	BIAN BIBN BIBN BIBN		
Principa' Place	o of Rucinose	Mailing Address							
% ANTONIO LO	ozano ne blvd. 40th floor	% ANTONIO LOZANO	ANTONIO LOZANO O S. BISCAYNE BLVD. 40TH FLOOR						
						Date Incorporated or Qualified 05/11/1984	3a, Date of Last I 08/16/1996	Report	
2. Principal Place of Business 28. Mailing Address						4. FEI Number		applied For	
21		26				59-2422572		lot Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional lequired	
City & State	ė	City & State	City & State			6. Election Campaign Financing		May Be	
23		28	,			Trust Fund Contribution		to Fees	
Zip				Ountry 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No					
24 25 29 34 9. Name and Address of Current Registered Agent				Florida Statutes L1					
LAZ/	ANO, ANTONIO		1	B1	Name	MANUFACTOR OF THE PROPERTY OF			
200 S. BISCAYNE BLVD.				82	Street Add	dress (P.O. Box Number is Not Acceptate	ole)		
40TH FLOOR							· · · · · · · · · · · · · · · · · · ·		
MIAMI FL 33131-2398				B3					
				В4	City		FL 85 Zip	Code	
11. Pursuant t	to the provisions of Sections 607.0	502 and 607.1508, Florida Statute	es, the abo	ove	-named co	rporation submits this statement for the p	ourpose of changing	its registered	
office or n agent. La	egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such change was a ligations of, Section 607.0505, Flo	uthorized orida Statu	by ites	the corpora	ation's board of directors. I hereby accept	of the appointment as	s registered	
SIGNATURE									
12.	Signalize type disciplinated panie of regions of OFFICERS A		E flegistered	Ager	nt signature req	uired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTO	RS IN 12	
TITLE				.E		ADDITIONO OF THE COLUMN	Change		
NAME				NAME STREET ADDRESS			·		
STREET ADORESS									
CUTA- 21-SI-SIF	MIAMI FL 33131-2398		1.4 CIT		T - ZIP		· · · · · · · · · · · · · · · · · · ·		
TITLE	DELETE			21 TITLE			Change	Addition	
NAME CAOCITA MANAGEMENT	SMITH, JOHN E. 200 S. BISCAYNE BLVD. STE 4000			2 2 NAME 2 3 STREET ADDRESS					
STREET ADDRESS CITY - ST - ZIP	MIAMI FL 33131-2398	L 1000	2.4 CIT						
TITLE	VD DELETE.			LE.			☐ Change	Addition	
NAME	DAVIS, ALVIN B.		3.2 NAN	đΕ					
STREET ADDRESS	200 S. BISCAYNE BLVD. STI	E. 4000	3.3 STR	EET /	ADDRESS				
CITY - \$1 - ZIP	MIAMI FL 33131-2398	Tors Fee	3.4. CIT	******	T-ZIP		T About	p austan	
TITLE NAME	S Perez, Janet e	DELETE	4.1 TITL		ł		Change	Addition	
STHEET ADDRESS	200 S. BISCAYNE BLVD. ST	E. 4000	4, 2 NA 4 3 STR		ADDRESS				
City-St-ZiP	MIAMI FL 33131-2398		4.4 CIT			•			
Tiflef	AST	DELETE	5,1 T(T)				☐ Change	Addition	
NAME.	MASS C1 00404 0000			ИE		•			
STREET ADDRESS					ADDRESS			i	
CHY-ST-ZIP	MIAMI FL 33131-2398	DELETE	5.4 CIT		T-ZIP		Change	Addition	
TITLE NAME		LJ DECETE	61 TITE 62 NAI		1		∟ change	L ADUITORI	
STREET ADDRESS					ADDRESS				
STREET PURPLUS			0.3 511	16. C A					

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 threeter of the cereoiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 42 or Block 13 if changed, or on an attachment with an address. DIRECTOR OF HUMAN RESOURCES

SIGNATURE:

1/10/97 (305)577-2803

FILED

Feb 03 1997 8:00am