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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # M07054

SIGNATURE:

(3)

Mailing Address C300 CW 91 CT

J.M. SERVICES NO. ONE INC.

FILED Feb 05 1997 8:00am Secretary of State

Daytime Phone #

MIAMI FL 33155	MIAMI FL 33155-1734			
			3. Date incorporated or Qualified 10/29/1984	3a. Date of Last Report 09/19/1996
2. Principal Place of Business	2a. Mailing Address	12 C/L ct	4. FEI Number	Applied For
18221 NW. 54 ST	<u> </u>	<u>w 54 st</u>	59-2538268	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State	41.	6. Election Campaign Financing	\$5.00 May Be
Miami, Fla.	28 Miami	, 1 10	Trust Fund Contribution	Added to Fees
Zip 3316(0 25 U.S.A.	2p 23 1 1 0	Country 30	8. This corporation has liability for i	ntangible tax under s. 199.032, Yes :: No
24 35160 25 USH 9. Name and Address of Curr		30 457	10. Name and Address of New Re	
TRIAY, CARLOS A ESQUIRE		81 Name		E
OOD DONCE DE LEON			Address (P.O. Box Number is Not Acceptable)	
SUITE 1110 CORAL GABLES FL 33134				
		83		
		84 City		85 Zip Code
11. Pursuant to the provisions of Sections 607.0	COO and COZ 1EOO Florido Ctoruto	s the about pamed corn	position cultimite this statement for the s	FL S Zip code
office or registered agent, or both, in the Str agent. I am familiar with, and accept the obli	ate of Florida Such change was a	uthorized by the corporati	ion's board of directors. I hereby accep	of the appointment as registered
SIGNATURE		,		
Suprature, typed or protect name of registered		: Registered Agent signature requir		DATE
	AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12 Change
INITIASTE IOOF M. ID	□ nerete	1.1 TITLE 1.2 NAME		CT CHARRE CT AUGICIOS
NAME INFANTE, JOSE M., Jr. STREEL ADDRESS 3225 BIRD AVE		1.3 STREET ADDRESS		
CITY - ST - ZIP MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	DELETE	2.1 TITLE		Change Addition
NAME		2.2 NAME	". ".	
STREET ADDRESS		2.3 STREET ADDRESS		
CHY-S1-7IP	DELETE	2. 4 C(TY-ST-Z)P		[] 6: [] (428)
THILE	☐ DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS 3.4, CITY-ST-ZIP		
CITY- ST- ZIP TITLE	DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY: ST ZIP		4.4 CITY - ST - ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
		5.3 STREET ADDRESS		
STREET ADORESS		5.4 CITY - ST - ZIP		
CITY-S1-ZIP	□ nciere			Change Bridition
CITY-S1-ZIP FITLE	DELETE	6.1 TITLE		Change Addition
CHY-SI-ZIP TILE NAME	☐ DELETE	6.1 TITLE 6.2 NAME		☐ Change ☐ Addition
CITY-SI-ZIP TILE	☐ DELETE	6.1 TITLE		Change Addition