FII	F NOW- FILING FR	F AFTER	R MAV 1	IS \$225 NA			
PROFIT CORPORATION ANNUAL REPORT 1996			FLORIDA DE PARTMENT OF STATE Sandra B Mortham Secretary of State DIVISION OF CORPORATIONS				
	MENT # MO83	313	(2)				
1. Corporation	EL, INC.		(-/				
1101110	,cc, 1110·				1 30 8 13 8 14 18 18 18 18 18 18 18 18 18 18 18 18 18	D (file design dide) design design	 }
Principal Place	of Business	Mailmç	Address				
2160 S.W. 60 CT. 2160 S.W. 60 CT. MIAMI FL 33155 MIAMI FL 33155							
MIAMI FE 00		MIAR	MI FL 33133		Date Incorporated or Qualified 11/29/1984	3a. Date of Last F	
·	ace of Business	hi i i	iling Address		4, FEI Number	·	Applied For
Suite, Apt.	#, etc.	26 Sui	te, Apt. #. etc.		59-2505668		Not Applicable 5 Additional
City & State		27	- 35 55		5. Certificate of Status Desired		Required
23		[28]	/ & State		Flection Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Z _I p	Country 25	Z _I p		Country 30	8. This corporation has liability for it	ntangible tax under s	
	9. Name and Address of Cur		d Agent	30	Florida Statutes Yes 10. Name and Address of New Ri		
2160 S.I MIAMI F	o the provisions of Sections 607.03	502 and 607.150 fortidal Such cha	08, Florida Statut noe was author	83 84 City es, the above named corpor	ress (P.O. Box Number is Not Acceptable ration submits this statement for the pury rd of directors. Thereby accept the apper	85 7	p Code registered office
familiar wit	h, and accept the obligations of, S	ection 607.0505	, Florida Statutes	s.	to or directors. Thereby asserbt the appo	inunent as registered	ragent. ram
	Signature, typed or printed name of registered a	-		Dis Begisteres Agent signature reserve	awii ne chaq	DATE	
12. 111LE	PTD	AND DIRECTOR	S DELETE	13.	ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTO	ORS IN 12 Add tion
NAME	BARRIOS, ANGEL M.			1.2 NAME		Orange	Addition
STREET ADDRESS CITY-ST-ZIP	2160 S.W. 60TH COURT MIAMI FL			1 3 STREET ADDRESS			
TITLE	VSD		DELETE	14 CITY-ST-ZIP 2 1 TITLF		Change	☐ Addition
NAME	BARRIOS, MARISEL			2.2 NAME			
STREET ADDRESS OTY-ST-ZIP	2160 S.W. 60TH COURT MIAMI FL			2 3 STREET ADORESS			
TIPLE	MIAMI FL		DELFTE	2.4 CHY+ST+ZIP 3.1 DTLF		[] Change	Addition
NAME				3.2 NAME			
STREET ADDRESS				33 STREET ADDRESS			
CITY-ST-ZIP TITLE			[] DELFTE	3.4 CITY-ST-7/P	-20000175		
NAME			Пин	4 1 TITLE		SII Uniternange	☐ Addition
STREET ADDRESS				4.3 STREET ADDRESS	***200.00		
CITY - ST - ZIF				4.4.0HY-ST-7IP	······································		
TITLE NAME			DELETE	5 1 THLE		☐ Change	☐ Addition
STREET ADDRESS				5.2 NAME 5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4.0-(1Y-S1-ZIF)			ĺ
TITLE			DELETE	6 1 TITLE		☐ Change	Addition

CITY-S1-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 are an officer or director of the corporation or the receiver or trustee 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 attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS