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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	997		/	ary of State CORPORATIO	DNS	Secretary of State		
	IENT # Name NLIMITED IN	M10932 c.	(5)			# #24 M 6 11 10 1 10 11 11 11 11 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15	1111 11 1 1 212 11 11 11 11 11 11 11 11 11 11 11 1	
Principal Place of Business 10125 N.W. 116 WAY #5 MIAMI FL 33178			Mailing Address 10125 N.W. 116 WAY ≢5 MIAMI FL 33178-1164					
U\$			US			 Date Incorporated or Qualified 02/04/1985 	3a. Date of Last R 04/24/1996	eport
2. Principal Pta 21	ce of Business		2a. Mailing Address 26			4. FEI Number 59-2537773	— — —	oplied For of Applicable
Suite, Apt #. 22	etc		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 / Fee Re	
City & State			City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Ζιρ 24	25]	Country	7ір 29	Country 30			Yes No	. 199.032,
F(A) I		Address of Current R	egistered Agent	81	Name	10. Name and Address of New Re	Istered Agent	
2801	ERAS, VIVIAN PONCE DE LI E 1170			82		dress (P.O. Box Number is Not Acceptab	le)	
CORA	IL GABLES FL	33134		83			······································	
				84	City		FL 85 2ip 0	Code
SIGNATURE						poration submits this statement for the pation's board of directors. I hereby accep		s registered registered
12.	grature typed or prod	od ruvue of regions coll agent a OFFICERS AND E		TE: Registered Age	nt signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	FRS AND DIRECTOR	S IN 12
	DPT	CAT IOLITO FILLE	DELETE	1.1 TITLE		ADDITIONAL TO STATE	☐ Change	Addition
STREET ADDRESS	FALERO, RAM 10125 NW 11	6 WAY #5		1.2 NAME 1.3 SYREET	ADDRESS			
V-11 0/ 1/-	MIAMI FL 331	78		1.4 CITY-S	T-ZIP			
	dvs rodriguez,	SAMET FASA	DELETE	21 TITLE	ļ .		Change	Addition
SUREFT ADDRESS	10125 N.W. 1 MIAMI FL 331	16 WAY		22 NAME 23 STREET	Į.			
City - S1 - ZiP Tify F	HILANII FL 991	· · · · · · · · · · · · · · · · · · ·	DELETE	2. 4 CITY-5 3.1 TITLE	ST - ZIP		Change	Addition
NAME				3.2 NAME	}	4		
STREET ADERESS				3.3 STREET	address			
C)1y - S1 - 71€				3.4. CITY-5	ST- ZIP			
TITLE			☐ DELETE	4.1 TITLE			Change	Addition
NAME				4.2 NAME				
STHEET ADDRESS				43 STREET	ADDRESS			
CITY-S1-Z-			DELETE	44 CITY-S	T-ZIP		1100000	T Addition
TIFLE			DELETE	5 1 TITLE			Change	Addition
NAME CASS L PROPERCE				52 NAME	ADDOLGG			
STREET ADORESS				5.3 STREET	- 1			}
CHY-ST 26F		······	☐ DELETE	5.4 CITY-S 6.1 TITLE	(-ZIP		☐ Change	Addition
NAME				6.2 NAME				-
STREET ADORESS				6.3 STREET	ADDRESS			
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14. If 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 suppliemental 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 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, they an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/97

(305) 888-9939

FILED

Feb 25 1997 8:00am