## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

M16319

## DOCUMENT # 1. Corporation Name

Principal Place o 7921 W. DR P.O. BOX 4	IVE <b>#</b> 1							
-					3. Date Incorporated or Qualified 06/06/1985		of Last Re 04/27/1	
. Principal Place of Business 2a. Mailing Ad 26			Address		4. FEI Number 59-2549504		<b> </b>	Applied For Not Applicable
Suite, Apt. #, etc. Suite, Apt. #			#, etc.			\$8.75 Addi		
27		<del></del> ,			5. Certificate of Status Desired	Fee Required		
City & State	City & State	y & State		6. Election Campaign Financing \$5.00 Ma			) May Be	
3	28			Trust Fund Contribution Added to Fees				
Žip ∃	Country	Zip	Cou	ntry	8. This corporation has liability for Florida Statutes Yes	intangible ta ₃ □ No	x under s	199.032,
	9. Name and Address of Currer	29 Agent	[30]	. ,	10. Name and Address of New F		Agent	
	g. Hallo and Address of Carre	ii riogistorou Agent		B1 Name	10.			
MONZON, ERWIN			į	1	Street Address (P.O. Box Number is Not Acceptable)			
11600 N E 10 AVE			]6					
	FL 33161			83				
				64 63			loc Ziv	o Code
				84 City		FL	<b>85</b>   Zip	Code
IGNATURE si <b>2.</b>	yriature -typed or printed name of registered agen OFFICERS AN	t and title if applicable. (NO ID DIRECTORS	OTE: Registered	Agent signature require	id when reinstating) ADDITIONS/CHANGES TO OFF			
ITLE	P	☐ DELETE	1, 1 (	TLE			Change	☐ Addition
AME	MONZON, ERWIN		1.2 N/	Μĉ				
THEET ADDRESS	11600 N.E. 10TH AVENUE		1.3 ST	REET ADDRESS				
HY-SI-ZIP	MIAMI FL	- April pr		TY-ST-ZIP			*1 Change	Addition
ITLE		☐ DELETE	2 1 7			L	Change	☐ Mudicion
IAME			22 N/	REET ADDRESS				
STREET ADDRESS				TY-ST-ZIP				
CITY - ST - ZIP		DELETE	3 1 7			Е	Change	Addition
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(1Y - \$1 - ZIP			3.4 CI	TY-ST-ZIP				
TLE		□ DELETE	4.17	ITLE		[	Change	☐ Addition
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TREET ADDRESS			1	ireet address				
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ITLE		☐ DELETE	6.1 T				Change	☐ Addition
IAME		_	62 N	AME				
STREET ADDRESS			63 S	TREET ADDRESS				
DTY-ST-ZIP			64C	ITY-ST-ZIP				
14. I do hereby certify that oath; that I	certify that the information supplied the information indicated on this ann am an officer or director the corp shock 12 or Block 13 if spanned or	with this filing is voluntarily fur jual report or supplemental and oration or the receiver or trust on an attachment with an add	nished and nual report i ee empowe dress	does not qualify is true and accur- red to execute th	for the exemption stated in Section 119 ate and that my signature shall have the his report as required by Chapter 607, F	3.07(3)(k), Flo e same legal Florida Statut	irida Statut effect as it es; and thi	es. I further ' made under at my name

SIGNATURE:

4/a/g6 305-891-0207