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

**PROFIT** CORPORATION ANNUAL REPORT

1997

LUIS OLIVARES, INC.



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M28860

(8)

## **FILED** Feb 04 1997 8:00am Secretary of State

2. Principal Place of Business	No
Suite Apt. # etc  Suite Apt. #	\$8.75 Additional Fee Required \$5.00 May Be Added to Fees ax under s. 199.032, No
Suite, Apr. #. etc.    Suite, Apr. #. etc.	\$8.75 Additional Fee Required \$5.00 May Be Added to Fees ax under s. 199.032, No
City & State  Country  A. This corporation has liability for intangible tax Florida Statutes  Florida Statutes  Yes In  Name and Address of New Registered Age  WOLFSON, JEROME  3399 S.W. 3RD AVE.  MIAMI FL 33145  B1 Name  B2 Street Address (P.O. Box Number is Not Acceptable)  B3 Street Address (P.O. Box Number is Not Acceptable)  B1 Name  B2 Street Address (P.O. Box Number is Not Acceptable)  B3 Street Address (P.O. Box Number is Not Acceptable)  B1 Name  B2 Street Address (P.O. Box Number is Not Acceptable)  B3 Street Address (P.O. Box Number is Not Acceptable)  B4 City  FL  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of choffice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appoin agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  D1 DELETE  1.1 TITLE  1.3 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  16. Election Campaign Trust Fund Contribution of Statutes  17. TITLE  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  19. ADDITIONS/CHAN	Fee Required  \$5.00 May Be Added to Fees ax under s. 199.032, No
City & State  28  28  Zip  Country  Zip  Country  A. This corporation has liability for intangible tax Florida Statutes  9. Name and Address of Current Registered Agent  WOLFSON, JEROME 3399 S.W. 3RD AVE. MIAMI FL 33145  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of choffice or registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appoint agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appoint agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. STREET ADDRESS	\$5.00 May Be Added to Fees ax under s. 199.032, No
23	Added to Fees ax under s. 199.032, No
Zip Country Zip Country Zip Country 8. This corporation has liability for intangible tax Florida Statutes Yes 1.  9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Age WOLFSON, JEROME 3399 S.W. 3RD AVE. MIAMI FL 33145  81 Name 82 Street Address (P.O., Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of che office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appoint agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signa of specific posted registered agent ag	ax under s. 199.032, No
9. Name and Address of Current Registered Agent  WOLFSON, JEROME 3399 S.W. 3RD AVE. MIAMI FL 33145  81 Name 82 Street Address (P.O., Box Number is Not Acceptable)  84 City  FL  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of che office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appoint agent, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE Signa recognition of agent agent and allest applicable (NOTE Registered Agent signature required when renstating)  DATE 11. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. STREET ADDRESS 15321 TURNBULL DR. 13 STREET ADDRESS 13321 TURNBULL DR. 13 STREET ADDRESS	No
WOLFSON, JEROME 3399 S.W. 3RD AVE. MIAMI FL 33145  81 Name 82 Street Address (P.O., Box Number is Not Acceptable) 83  84 City  FL  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of choosing or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appoint agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  Signature species pented name of registered agent agent applicable.  NOTE Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  INSTREET ADDRESS  STREET ADDRESS  STREET ADDRESS  13. STREET ADDRESS  14. TITLE  DUVARES, LUIS  13. STREET ADDRESS	
3399 S.W. 3RD AVE. MIAMI FL 33145  82 Street Address (P.O., Box Number is Not Acceptable)  83  84 City  FL  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of choffice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appoint agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signa no specie disease of registered agent agent and other it applicable.  (NOTE Registered Agent's greature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  1.1 TITLE  DELETE  1.2 NAME  1.3 STREET ADDRESS  1.3 STREET ADDRESS	
MIAMI FL 33145  83  84 City  FL  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of chooffice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appoint agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signa or specie pointed trans of registered agent as distilled (applicable)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14.1 TITLE  DELETE  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.3 STREET ADDRESS	
MIAMI FL 33145  83  84 City  FL  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of chooffice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appoint agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signa or specie pointed trans of registered agent as distilled (applicable)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14.1 TITLE  DELETE  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.3 STREET ADDRESS	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of chapter of registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appoint a familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signa of Special or pointed frame of registered agent at other it applicable.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS AND DIRECTORS  11.1 TITLE  MAME  OLIVARES, LUIS  1.2 NAME  1.3 STREET ADDRESS  1.3 STREET ADDRESS	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of che office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appoint agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signa re specie period registered agent adopted the deligible of the purpose of che appoint agent ag	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of che office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appoint agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  Signate Specific period a period agent agent adulted applicable.  (NOTE Registered Agent a greature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  INTITLE  OLIVARES, LUIS  1.2 NAME  1.3 STREET ADDRESS  1.3 STREET ADDRESS	85 Zip Code
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. TITLE  NAME  OLVARES, LUIS  STREET ADDRESS  15321 TURNBULL DR.  AMAIN LAMES EI  AMAIN LAMES EI  AMAIN LAMES EI  STREET ADDRESS  STREET ADDRESS  AMAIN LAMES EI  CONTROL OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  AMAIN LAMES EI  1.3 STREET ADDRESS	changing its registered
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE  NAME OLIVARES, LUIS 1.2 NAME 1.3 STREET ADDRESS  AMAN AMES EI  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS AND	
TITLE P DELETE 1.1 TITLE  NAME OLIVARES, LUIS  STREET ADDRESS 15321 TURNBULL DR.  MIANAL LAVES EL  1.3 STREET ADDRESS	DIRECTORS IN 12
STREET ADDRESS  15321 TURNBULL DR.  1.3 STREET ADDRESS	Change Addition
STREET ADDRESS 15321 TURNBULL DR. 1.3 STREET ADDRESS	
MIANN I AVEC EI	
CITY-S1-ZIP MIAMI LANCO FL 1,4 CITY-S1-ZIP	
	Change Addition
NAME OLIVARES, MARISSA 2.2 NAME	
STREET ADDRESS 15321 TURNBULL DR. 2.3 STREET ADDRESS	
CITY-ST-7IP MIAMI LAKES FL 2 4 CITY-ST-7IP	
	Change Addition
NAME 32 NAME	
STREET ADDRESS  33 STREET ADDRESS	
CHY-SI-7P 34.CHY-ST-ZIP	
	Change Addition
NAME 4 2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	
CITY-ST-2IF 4.4 CITY-ST-ZIP	
	Change Addition
NAME 5.2 NAME	
SIGNET ADDRESS 5.3 STREET ADDRESS	
CITY - ST - ZIP 5.4 CITY - ST - ZIP	
	Change Addition
NAME 6.2 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
CITY-S1-ZIP 6.4 CITY-S1-ZIP	

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 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 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.

SIGNATURE: