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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M29143
1. Corporation Name
CASAS BUSINESS SERVICES INC.

(8)

FILED Apr 30 1997 8:00am Secretary of State

:	
 4 100 64 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 2	

Principal Place of Business Mailing Address										
4715 E. 10TH C	COURT	4715 E. 10TI	H COURT							
HALEAH FL 33	013-2121	HIALEAH FL	33013-2121							
							3. Date Incorporated or Qualified 03/19/1986		nte of Last)1/1996	Report
2. Principal P	lace of Business	2a. Mailing	Address				4. FEI Number		A	Applied For
21		26					59-2630896	· · · · · · · · · · · · · · · ·		Not Applicable
Suite, Apt.	#, etc.	├ -¬	pt. #, etc.				5. Certificate of Status Desired			Additional Required
22 City & Stat	6	27 City & S	 State				6. Election Campaign Financing	·-····		
23	-	28	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Trust Fund Contribution			May Be of to Fees
Zip	Country	Zip		Cour	ntry		8. This corporation has liability for i	ntangible		
24	25	29	3	0				<u> </u>	No No	
	9, Name and Address of Currer	nt Registered Ag	ent		T		10. Name and Address of New Re	gistered .	Agent	
	tos, solangee			1	81	Name				
	COLLINS AVENUE, B-801					Street	Address (P.O. Box Number is Not Acceptab	le)		
MIAN	AII BEACH FL 33139			-	83					
					03					
1				Ĭ	84	City		P2 1	85 Zq	Code Code
11 Burguant	to the provisions of Postions 607.000	02 and 607 16/19	Florida Statutas	the ob		noused	corporation submits this statement for the p	FL	abanciac	ito sociatored
office or r	egislered agent, or both, in the State im familiar with, and accept the oblig	of Florida, Such	chapae was au	Ihorized	lhv	the core	poration's board of directors. I hereby accep	of the app	ointment a	s registered
SIGNATURE	Signature, typod or printed name of registered age	not seed their manuscrible	(NOTE: I	Tornebornel	Agor	al signature	required when reinstating)	DATE		
12.		D DIRECTORS	(16271)	18.	ngu	ir piğirininis	ADDITIONS/CHANGES TO OFFICE		DIRECTO	PRS IN 12
TITLE	PD		DELETE	1.1 1/11	Lŧ				Change	Addition
NAME	CASTELLANOS, RODOLFO, SF	₹		1.2 NAM	ME					
STREET ADDRESS	2675 W. 66 ST. #12			1.3 STA	EEL A	ADORESS				
CITY-ST-ZIP	HIALEAH FL			1.4 CH	Y - S1	- ZIP				
TITLE DIR	VTD	l	DELETE	2.1 1111	LE.		. D		Change	Addition
NAME	SANTOS, SOLANGEE			2.2 NAI	ME					
STREET ADDRESS	2301 COLLINS AVE B-801			•		ADDRESS	·			
CITY-ST-ZIP	MIAMI BEACH FL		DELETE	2 4 C(1		1 - ZIP			Chann	Marketine .
TITLE		ŀ	DELETE	3 1 TiTL			V.T.	-c 7	Change	Addition
STREET ADDRESS			,	3.2 NAM		ADDRESS	17000 CHS/2444	27 ~	~	
CITY-ST-ZIP				3.5 STR 3.4 CI3		1. 7IP	RODOLFO CASTELLAND 3279 SW 141 AVE MIAMI FL 3317	_		
TITLE			DELETE	4.1 TITE		1: 21/			Change	Addition
NAME		·		4.2 NA						
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP				4.4 Ci1						
TITLE		I	DELETE	5.1 7(1)	E				☐ Change	Addition
NAME				5.2 NAM	VIE.					
STREET ADDRESS				5.3 STA	REEL	ADDRESS				
CITY-ST-ZIP			—	5.4 011		- 21P				
TITLE		l	DELETE	6.1 1111	LE				☐ Change	: 🔲 Addition
NAME				6.2 NAM						
STREET ADDRESS				1		ADDRESS				
CITY-ST-ZIP				6.4 CIT	Y - S1	- ZIP				

I do hereby certify that the information supplied with this filling 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.

IONATURE Rollock Gastelland So

1/30 100