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 # M30493

(4)

BENDEZU & YUPANQUI ENTERPRISES, INC.

FILED May 02 1997 8:00am Secretary of State

Principal Place of Business		Mailing Address	Mailing Address			4 I DEFLEATI ERA TRIKE RATIN OLDIO LANDE ALLA BURIL BURIL BERKE REGIL BERKE BURIL BERKE				
7929 NW 64ST MIAMI FL 33166 US		7929 NW 64 ST MIAMI FL 33166-2723 US								
		• •				3. Date Incorporated or Qualified 04/15/1986		te of Lasi 28/1996		
2. Principal Place of Business 21		2a. Mailing Address 26			4. FET Number 59-2662366			Applied For Not Applicable		
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required	
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip	Country	Zip	Cou	intry		8. This corporation has liability for i			s. 199.032,	
24	25	29	30			Florida Statutes 10. Name and Address of New Reg	Yes [
	9, Name and Address of Curren	ii Registerea Agent	 -	81	Name	10. Name and Address of New He	istered)	egent.		
	TURLA, GEORGE D.									
6301 BISCAYNE BLVD. STE.202			82 Street Ad		dress (P.O. Box Number is Not Acceptab	e)				
	MI FL 33138		l	83	*					
				84	City		FL	85 Zi	p Code	
11 Pursuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Sta	tutes the at	hove	-named cor	poration submits this statement for the p		changing	ils registered	
office or i	registered agent, or both, in the State	of Florida, Such change wa	is authorized	d by	the corpora	poration submits this statement for the p ation's board of directors. I hereby accep	the app	ointment	as registered	
SIGNATURE	an izanika: with, and accept the delige	anorts of, account 607.0000,	TIOHOB GIBI	uco						
	Signature, typed or printed name of registered age			i Age	c signature requ	ared when reinstating)	DATE	DIDEOX		
12.	OFFICERS ANI	DELETE	13.	11.6	_[ADDITIONS/CHANGES TO OFFIC	ERS AND	☐ Chang		
NAME	BENDEZU, JUAN		1.2 N/		į			Onking	o	
STREET ADDRESS	9935 SW 87ST				ADORESS					
CITY-ST-ZIP	MIAM! FL			TY-\$1	Į.					
TITLE	VSD	☐ DELETE	2.1 7(1	11.6				☐ Chang	e 🔲 Addition	
NAME	GILVEY, KETTY		2,2 NA	AME	ŀ					
STREET ADDRESS	12850 SW 72 TERRACE				ADDRESS					
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	2. 4 C 3.1 1s		1-ZIP			☐ Chang	e Addition	
NAME		LJ bereit	3.2 N/							
STREET ADDRESS			1		ADDRESS					
CITY-ST-ZIP		•	3.4. C							
TITLE		DELETE	4.1 TI					Chang	e 🔲 Addition	
NAME			4. 2 N	AME.						
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		DELETE		1Y-\$1	I-ZIP			Chana	a Addition	
TITLE NAME		ן וענגונ	5.1 TB 5.2 N/					L Chang	e L Addition	
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP				TY - S1						
TITLE	#	☐ DELETE	6.1 Tr		 			Chang	e 🔲 Addition	
NAME			6.2 N/	AME						
STREET ADDRESS			6.3 ST	ireen .	ADDRESS					
CITY-ST-ZIP			6,4 CI	1Y-\$1		ed in Caption 110 07/9\(\(\)). Elevida Statuta				
SA Idohoro	by partify that the information europies	et with this tilion elege ant eur	conductor than	avor	anation otalo	azi in Saetion 110 (17/3)(i). Elorida Statutor	. I turthor	- cortification	at the	

Too manage centry machine minimation supplied with this time gross not quality 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.