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 # M36555

(4)

EDAL PLAZA, INC.

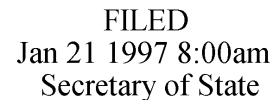
Principal Place of Business

10420 SW 97TH COURT MIAMI FL 33176

SIGNATURE:

Mailing Address

10420 SW 97TH COURT MIAMI FL 33176-2850 US





US		US		3. Date Incorporated or Qualified 08/08/1986	3a. Date of Last Report 02/20/1996	
2. Principal Pl	/ ///	2a. Mailing Address	irdi Ave	4. FEI Number	Applied For	
21 1488	migaria 1108.	[T]	IT OH ATVE.	59-2778081	Not Applicable	
Suite, Apt. #. etc. Suite, Apt. #, etc. 27 27			· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
23 Coral Gubles, FW 28 Coral Gubles			15, FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
コマスル	Courty 1	7 3 3 146	Country	8. This corporation has liability for in	. • •	
24 25/4	9. Name and Address of Curren	Pagistared Agent	30 0 2/1	Florida Statutes 10. Name and Address of New Reg	Yes V No	
DDV		I Negistered Agent	81 Name	10. Hallo allo Address of New Hos	Marai de vilani	
BRYANS, ALICIA 1428 ALGARDI AVENUE						
CORAL GABLES FL 33146			82 Street A	82 Street Address (P.O. Box Number is Not Acceptable)		
COF	VAL GABLES I E 30140		83			
			84 City		FL 85 Zip Code	
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508. Florida Statute	s, the above-named of	corporation submits this statement for the p		
office or re	egistered agent, or both, in the State ni fam har with, and accept the obliga	of Florida. Such change was a	uthorized by the corp-	oration's board of directors. I hereby accep	t the appointment as registered	
SIGNATURE		/APNTE	Registered Agent agnature r		DATE	
12.	Signature is and or prior dimension region countries OFFICERS ANI	****	13.	ADDITIONS/CHANGES TO OFFIC		
TITLE	PD	☐ DELETE	1.1 TITLE	1,021,0,0,1,1,020,10	Change Addition	
NAME	ARANGO, EDUARDO		1,2 NAME			
STREET ADDRESS	10420 SW 97TH CT		1.3 STREET ADDRESS			
City - S7 - ZiP	MIAMI FL		1.4 CITY - ST - ZIP			
TITLE	DVT	DELETE	2 1 TITLE		Change Addition	
NAME	JORGE, ALBERTO		2.2 NAME			
STREET ADDRESS	5901 SW 86TH ST		2.3 STREET ADDRESS			
City - St - ZIP	Miami fl		2 4 CITY-ST-ZIP			
TITLE	DS	☐ DELETE	3 1 TITLE		Change Addition	
NAMÉ	BRYANS, ALICIA		3 2 NAME			
STREET ADDRESS	1428 ALGARDI AVE		3 3 STREET ADDRESS			
C(TY - S1 - 7IP	CORAL GABLES FL	,	3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4 1 TITLE		Change Addition	
NAME			4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - S1 - ZIP			4.4 City - St - ZIP	······································		
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			52 NAME			
STREET ADDRESS			53 STREET ADDRESS			
CITY - ST - ZIF			5.4 CHY-ST-ZIP			
TILLE		☐ DELETE	61 TITLE		Change Addition	
NAME			62 NAME			
STREET ADDRESS			63 STREET ADDRESS			
CITY - ST - ZIP	:		6.4 CITY - ST - ZIP		1.7.41	
informatic	w indicated on the annual topart of s	: uszdeniental angual regort is tr	ue and accurate and.	ated in Section 119.07(3)(i), Florida Statute: that my signature shall have the same lega	l effect as it made under oath: tha	
Lam an o appears i	flicer or director of the corporation or n Block 12 or Block 13 if changed, o	the receiver or trustee empower on an adjuchment with an add	ered to execute this ruress.	eport as required by Chapter 607, Florida S	tatutes; and that my name	