## 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 # M41740** 

(5)

## **FILED** Mar 19 1997 8:00am Secretary of State

Principal Place	WORLD,		Mailing Adde		- ··· · · <del>- ·</del>					
780 W. 84TH STREET HIALEAH FL 33014				HIALEAH FL 33014-3618						
							3. Date Incorporated or Qualified 11/17/1986	,	Date of Last R 5/14/1996	leport
2. Principal Place of Business			F1	2a. Mailing Address			4. FEI Number		Ap	oplied For
Suite, Apt. #, etc.			26 Suite Ant	Suite, Apt. #, etc			59-2822351		No \$8.75 A	ot Applicable
22	.,		27	· · · · · · · · · · · · · · · · · · ·			5. Certificate of Status Desired		Feo Re	
City & State	0		City & Sta	City & State			6. Election Campaign Financing \$5.00 May Be			
23 Country			28				Trust Fund Contribution Added to Fees			
Zip 24	<u> </u>	Country 25	7ip 29	-	Country 30]_		This corporation has liability for Florida Statutes	intangib ∐ Yes		. 199.032.
24		and Address of Curre					10. Name and Address of New R	egistere	d Agent	
CAL	ZADILLA, N	OEMI			81	Name				
		ADA COURT				Street Add	ress (P.O. Box Number is Not Accepta	ble)		
MIA	MI LAKES F	L 33014								
					83					
					84	City		FI	85 Zip (	Code
11. Pursuant	to the provisi	ons of Sections 607.05	02 and 607.1508, F	lorida Statutes	I s. the above	L e named corp	poration submits this statement for the			s registered
office or r agent. I a	registered age ım f <b>a</b> miliar wi <u>l</u>	ent, or both, in the State h, and accept the ວ່າ ເຊັ	e of Horida. Such c Aitions of, Seption (	hange was au i07.0505, Hor	ithorized by ida Statutes	z the corpora s.	poration submits this statement for the tion's board of directors. I hereby according	ipt the ap	opointment as	registered
SIGNATURE	VX	Jacus M	aladol	ar,						
12.	Signature, 1977	or printed name of registered as OF LICERS AN	ND (MRECTORS	(NOIS:	Heustered Agr	of signature regu	ied when razisating) ADDITIONS/CHANGES TO OFFI	DATE CERS AN	VO DIRECTOR	RS IN 12
TITLE	PD			DELETE	1.1 VIIVE			02.1074	☐ Change	Addition
NAME	CALZADIL	LA, NOEMI			1,2 NAME					
STREET ADDRESS		ARGINADA COURT			1 3 S1REC1	ADDRESS				
CITY-ST-ZIP	MIAMI LA	KES FL	···	1.6000	14 C/1Y - S	1 - 201	·			
TITLE NAME			L	DELLTE	2 1 1111 f 2 2 NAME				Change	Addition
STREET ADDRESS					2.3 STREET	ADDRESS				
CITY-ST-ZIP					2 4 CHY-5	l				
TITLE			<u> </u>	DELETE	3.1 HTCF	1			Change	Addition
NAME					3.2 NAMI	[				
STREET ADDRESS					3 3 STREET	·				
CITY-ST-ZIP TITLE	<u></u>		· · · · · · · · · ·	DELETE	3.4. CHY-5 4.1 HHF	S1 - ZIP			Change	Addition
NAME			L-	I WITCH	4.2 NAME	ĺ			CTI cusude	L Addition
STREET ADDRESS					4.3 STR[E]	ADDRESS				
CITY-ST-ZIP					4.4 CITY - S	1-70				
TITLE				DOLETE	5.1 THE	_[			Change	Addition
NAME					5.2 NAME					
STREET ADDRESS	}				53 STREET	ſ				-
CITY-ST-ZIP TITLE			· · · · · · · · · · · · · · · · · · ·	DELETE	5.4 C·1Y · S 6.1 TITLE	1 - ZIP			Change	Addition
NAME	1		L		6.2 NAME					
STREET ADDRESS					6 3 STREET	ADDRESS				
CITY-ST-ZIP					6.4 CITY - S					

14. I 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 logal effect as if made under earth; that I am an officer or director of the corporation or the receiver or trusted 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