FILE NOW: FI'.ING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Aug 20 1997 8:00am

ANNUAL REPORT 1997	Secretary of State DIVISION OF CORPORATIONS		Secretary of State	
DOCUMENT # M44600 1. Corporation Name ORANGE STATE 1000005 SUC'S CORP.				
CICADGE STATE TO	100 BO	T'S CORP	P.	
Principal Place of Business Mailing Address				
7300500 42 1 C				
Miami FL 33155 SAME		Hmeroan		
			3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Place of Business 2a. Mailing Address		4, FEI Number	Applied For	
21 SAME	26 SAME		392-77-353	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	N-E	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
SAME 28 SAME		Trust Fund Contribution	Added to Fees	
Zip Country 24 SANCE 25 SANCE	Z1p 29	Country	This corporation has liability for in Florida Statutes	itangible tax under s. 199,032, Yes No
9. Name and Address of Current			10. Name and Address of New Reg	Istered Agent
FRUSTINO MONTE	- 6 (81 Name		
82 Street Address (P.O. Box Number is Not Acceptable)				
1623 200 J. 60 CT				
Miani F1 3.	3174	84 City		85 Zip Code
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 changing its registered office or registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE Signature Lyped of the files have dependent agent	and title if applicantle . (fyO1E	Registered Agent signature requ	ired when reinstating)	DATE
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	
PRESIDENT	☐ DELETE	11 10116		Change Addition of
STREET ADDRESS 1550 ST COO MONTH	ONWAC	1.2 NAME 1.3 STREET ADDRESS		[8]
10222200 Je 3	ナ ヨマハブレム	1.4 CITY- \$1 - 7IP		
THE VICE PRESIDENT		2.1 TITLE		☐ Change ☐ Addition C
NAME LUIS R. ROBR	 しいデス	2.2 NAME		
STREET ADDRESS 4235 KED DICLE L	us crear 10236			
TITLE ALAMA FC	33(83 □ DELETE	2 4 CHTY-ST-ZIP		☐ Change ☐ Addition
SECVELYON		3.2 NAME		
STREET ADDRESS 8700 CD 33	EDE BOLL 305	3 3 STREET ADDRESS		ĺ
1001171 1001 1001 1001 1001 1001 1001 1		34 5.11 51 21		
TITLE	DELETE	41 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS		4. 2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS City-St-Zip		4.4 CITY-S1-7IP		
TITLE	☐ D£LETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		30
STREET ADDRESS		5.3 STREET ADDRESS		8.20
CITY-ST-ZIP	Dr. Ext	5.4 CITY - ST - 7IP		
TITLE	[_] DELETE	6 1 TITLE	سر مردد درون درسا درسا درسا السراد روزا	☐ Change ☐ Addition
NAME STREET ADDRESS		6.2 NAME 6.3 STREET ADDRESS	60000227 -08/25/97010	13406 112019
CITY-ST-ZIP		64 CITY - S1 - 7IP	***65.00	· L
14. I do hereby certify that the information supplied	with this filing does not qualify			I further certify that the

rior nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. If urther 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 it made under oath; that I am an officer or director of the corporation or true receiver or trulice 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 in an attainment with an address.

SIGNATURE: