## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

Principal Place of Business 120 NW. 2ND STREET MANI FL 30126  2 Principal Place of Business 2 R. Moling Address 2 Suite, Apt. 4 of. 20 Suite 3 Suite, Apt. 4 of. 20 Suite 4 Suite, Applicable 4 Suite, Applicable 4 Suite, Applicable 5 Suite, Applicable 5 Suite, Applicable 5 Suite, Applicable 6 Suite, Applicable 7 Suite, Applicable	1	MENT # M57940 CORPORATION	0 (2)				
MAMI FL 39126  MAMI FL 39126  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified   38. Date of Last Report   08/24/1987   03/04/1986   36. Date of Last Report   03	Principal Place of Business Mailing Address				· · · · · · · · · · · · · · · · · · ·	{	'EN BIBIN BIBIN BIBIN BIBIN BIBIN BIBIN BIBIN
MAMI FL 39126   MAMI FL 39126   DO NOT WRITE IN THIS SPACE						}	
2. Principal Place of Business	1						
2. Principal Place of Business	[						<del></del>
2. Maring Addross   2. Maring Addross   3. Maring Addross   4. FEI Number   65.0031376   Not Application   Not Application   Sciller, Apt. #, etc.   2. Skiller, Apt. #, etc.   2. Skil	1					'	· '
Solite, Apt. #, etc.    Solite, Apt. #, etc.	2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
Sulfa, Aptil R, etc.    Sulfa, Aptil R, etc.	21	_	26			65-0031376	
City & State   City & State   City & State   City & State   State   City & State   City & State   City & State   Sta							
28     29   28     29   29   29   20   29   20   20			<del></del>				Fee Hequired
Zip   Country   Zip   Gounts   Zip   20   30   Personal Proporty Tax due Just   30   Ne   No   No   No   No   No   No   No		e	├ <del>-</del> ¬ '				
28   28   29   30   Personal Property Tax due June 30   Ves   No		Country		Country	<del></del>	-{ <i>-</i>	
Delete Sirest Address of Current Registered Agent		<del>                                     </del>	——————————————————————————————————————				
13. 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 agent, or both, in the State of Florida Statutes. the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Statutes.  SIGNATURE  Signature and accept the objection of Oxfoots, Florida Statutes. The above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the objection of Oxfoots, Florida Statutes.  SIGNATURE  Signature, uprior or priord ment of my seried agent and time / approach to Critical Statutes.  TILL DEFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS IN 12  12. NAME  SIRET ADORSS IN 12  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. ARIOS, OUNTIN 10340 N.W. 46TH TERRACE  13. STRET ADORSS  GITY-ST-2P  MAMI FL 33178  14. CITY-ST-2P  ITILE  1. TITLE  2				<u> </u>			
10340 N.W. 46TH TERRACE MIAMI FL 33178  88 Street Address (P.O. Box Number is Not Acceptable)  89 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  81 Parsuant to the provisions of Sections 667 0502 and 607 1508, Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered signer, or both, in the State of Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered day the corporation's board of directors'. Interby accept the appointment as registered signer, and accept the objections of Section 672,9568, Floride Statutes.  SIGNATURE  12 OFTICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  14. AND DIRECTORS IN 12  15. INTEL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTEL ARIOS, OUINTIN  10340 N.W. 46TH TERRACE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTEL ARIOS, MARIA T  10340 N.W. 46TH TERRACE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTEL ARIOS, MARIA T  10340 N.W. 46TH TERRACE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTEL ARIOS, MARIA T  10340 N.W. 46TH TERRACE  13. STREET ADDRESS  CITY-ST-2P  INTEL  10. DELETE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTEL ARIOS, MARIA  13. STREET ADDRESS  CITY-ST-2P  INTEL  10. Change Addition  ARITHMEN, DELETE  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTEL ADDRESS  CITY-ST-2P  INTEL  10. Change Addition  ARITHMEN, DELETE  11. TITLE  10. Change Addition  ARITHMEN, DELETE  12. AMAGE  13. STREET ADDRESS  CITY-ST-2P  INTEL  10. Change Addition  ARITHMEN, DELETE  11. TITLE  12. Change Addition  ARITHMEN, DELETE  13. STREET ADDRESS  CITY-ST-2P  INTEL  14. CHANGES  15. CHANGES  CITY-ST-2P  INTEL  16. CHANGES  CITY-ST-2P  INTEL  17. CHANGES  CITY-ST-2P  INTEL  18. CHANGES  CITY-ST-2P  INTEL  18. CHANGES  CITY-ST-2P  INTEL  18. CHANGES  CITY-ST-2P	LAI	RIOS. QUINTIN		81	Name		
MIAMI FL 33176  83  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both in the State of Floridal Stude hangs was authorized by the corporation's board of directors. I throby accept the appointment as registered agent, or both in the State of Floridal Stude hangs was authorized by the corporation's board of directors. I throby accept the appointment as registered agent, and manifer with, and accept the obligations of, Section 607 0505, Floridal Statutes.  SIGNATURE  Signature, typed or priced name of legistered agent and to 8 apociate.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PURPORT OF THE STATE IN THE STATE IN THE STATE IN THE AGE IN STREET ADDRESS  10340 N.W. 46TH TERRACE  13 SIRELE ADDRESS  10340 N.W. 46TH TERRACE  14 SIRELE ADDRESS  10340 N.W. 46TH TERRACE  23 SIRELE ADDRESS  10340 N.W. 46TH TERRACE  24 SIRELE ADDRESS  10340 N.W. 46TH TERRACE  25 SIRELE ADDRESS  10340 N.W. 46TH TERRACE  25 SIRELE ADDRESS  10340 N.W. 46TH TERRACE  26 SIRELE ADDRESS  10340 N.W. 46TH TERRACE  27 AMAE  28 SIRELE ADDRESS  107Y-ST-2P  MIAMI FL 33178  104 OR 11 STREET  105 OR 11 STREET  107Y-ST-2P  MIAMI FL 33158  105 OR 11 STREET  107Y-ST-2P  MIAMI FL 33158  107Y-ST-2P  MIAMI FL 33158  108 OR 11 STREET  108 OR 11 STREET  108 OR 11 STREET  108 OR 11 STREET  109 OR 11 STREET ADDRESS  101Y-ST-2P  101 OR 11 STREET ADDRESS  101Y-ST-2P  101 OR 11				82	Street Addre	ess (P.O. Box Number is Not Accepte	able)
T1. 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 lite registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of divotors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of divotors. I hereby accept the appointment as registered agent with an accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  Signature, typed or nimed new or the purpose agent and the # reproducts.  12. OFFICERS AND DIRECTORS  T12. OFFICERS AND DIRECTORS  T13. ADDITIONS/GHANGES TO OFFICERS AND DIRECTORS IN 12  LARIOS, QUINTIN  12 NAME  SIREET ADDRESS  CITY-S1-2P  MAMI F1, 33178  LARIOS, MARIA T  10340 N.W. 46TH TERRACE  MIAMI F2, 33178  LARIOS, MARIA T  10340 N.W. 46TH TERRACE  1040 N.W. 46TH TERRACE  10540 N.W. 46TH TERRACE  1074-S1-2P  TITLE  1040 N.W. 46TH TERRACE  10540 N.W. 46TH TERR	MLA	VMI FL 33178					
TI. 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 agent. I am familiar with, and accopt the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signature, typed or printed named of registered agent and title 1 approached. (NOTE Registered Agent agent are remained with provided provided named of registered agent and title 1 approached. (NOTE Registered Agent agent are remained agent agent are remained when religiously accept the appointment as registered agent agent are remained when religiously accept the appointment as registered agent a				83			
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 affect or registered agent, or both, in the state of Florida Statutes.    Signature				84	City		FI 85 Zip Code
agent. I am tamillar with, and accept the obligations of, Socton 607.0505, Florida Statutes.  SIGNATURE  Signature, upad or printed name of regulared agent and his if applicable. (NOTE: Registered Agent signature required when refinitering)  DATE  12.	11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was author				named corporati	oration submits this statement for the only board of directors. I hereby accepts	
Signature, typed or primined nerve of two stered against and their despications. (NOTE: Registered Against signature required when refertishing)   DATE	agent. I a	m familiar with, and accept the obligation	tions of, Section 607,0505, Flor	ida Statutes.		•	
12.	SIGNATURE	Standard typed or printed name of registered again	Land title if applicable /NOTE	Registered Agen	t signature require	nd when reinstatum)	DATE
NAME   CARIOS, QUINTIN   12 NAME   13 STREET ADDRESS   14 CITY-ST-ZP   MIAMI FL 33178   14 CITY-ST-ZP   MIAMI FL 33178   10340 N.W. 46TH TERRACE   13 STREET ADDRESS   14 CITY-ST-ZP   MIAMI FL 33178   10340 N.W. 46TH TERRACE   23 STREET ADDRESS   24 CITY-ST-ZP   MIAMI FL 33178   24 CITY-ST-ZP   MIAMI FL 33178   24 CITY-ST-ZP   MIAMI FL 33178   24 CITY-ST-ZP   MIAMI FL 33158   33 STREET ADDRESS   33 STREET ADDRESS   33 STREET ADDRESS   34 CITY-ST-ZP   MIAMI FL 33158   44 CITY-ST-ZP   MIAMI	12.				a Bigino i oquit		
STREET ADDRESS   10340 N.W. 46TH TERRACE   1.3 STREET ADDRESS   1.4 City-St-Zip	TITLE	P	DELETE	1.1 TIPLE			Change Addition
City-st-zip	NAME	,		1.2 NAME			·
TITLE	STREET ADDRESS			1.3 STREET A	ADDRESS		•
NAME   LARIOS, MARIA T   10340 N.W. 46TH TERRACE   23 STREET ADDRESS   CITY-ST-ZIP   MIAMI FL 33178   24 CITY-ST-ZIP		MIAMI FL 33178					
STREET ADDRESS   10340 N.W. 48TH TERRACE   2.3 STREET ADDRESS   2.4 CITY-ST-ZIP   MIAMI FL 33178   2.4 CITY-ST-ZIP	1 1	V	r D€fF1F	<b>)</b>			☐ Change ☐ Addition
CITY-ST-ZIP							į
TITLE D DELETE 31 TITLE 32 NAME  STREET ADDRESS 6201 S.W. 96TH STREET 33 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33156 34. CITY-ST-ZIP  TITLE D D DELETE 4.1 TITLE 1. Change Addition  NAME MARTINEZ, DELIA 4.2 NAME  STREET ADDRESS CITY-ST-ZIP MIAMI FL 33158 4.4 CITY-ST-ZIP  TITLE D D DELETE 4.1 TITLE 1. Change Addition  NAME STREET ADDRESS CITY-ST-ZIP  TITLE D D DELETE 5.1 TITLE 1. Change Addition  NAME PALENZUELA, GONZALO JR 52 NAME  STREET ADDRESS CITY-ST-ZIP CORAL GABLES FL 33158 5.4 CITY-ST-ZIP  TITLE D D DELETE 5.1 TITLE 1. Change Addition  NAME PALENZUELA, GONZALO JR 5.2 NAME  STREET ADDRESS CITY-ST-ZIP CORAL GABLES FL 33158 5.4 CITY-ST-ZIP  TITLE D DELETE 5.1 TITLE 1. Change Addition  NAME 6.4 CITY-ST-ZIP CORAL GABLES FL 33158 5.4 CITY-ST-ZIP  TITLE 1. Change Addition  DELETE 6.1 TITLE 1. Change Addition	1				i		
NAME   CARRERAS, MARIA   32 NAME   33 STREET ADDRESS   CITY-ST-ZIP   MIAMI FL 33156   34.CITY-S1-ZIP			DELETE	<b>4</b>			Change Addition
STREET ADDRESS CITY-ST-ZIP MIAMI FL 33156 34. CITY-ST-ZIP TITLE D D DELETE 4.1 TITLE NAME MARTINEZ, DELIA STREET ADDRESS CITY-ST-ZIP MIAMI FL 33156 4.2 NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 33156 4.4 CITY-ST-ZIP TITLE D DELETE 5.1 TITLE D Change Addition	1			1			
CITY-ST-ZIP   MIAMI FL 33156							
TITLE D DELETE 4.1 TITLE		MIAMI FL 33156		3.4. CITY - S1 - ZIP			
STREET ADDRESS   7296 S.W. 102ND STREET   43 STREET ADDRESS   MIAM! FL 33158   44 CITY-ST-ZIP			DELETE				Change Addition
CITY-ST-ZIP         MIAMI FL 33158         4.4 CITY-ST-ZIP           TITLE         D         DELETE         5.1 TITLE         Change         Addition           NAME         PALENZUELA, GONZALO JR         5.2 NAME         STREET ADDRESS         1212 MANATI AVENUE         5.3 STREET ADDRESS           CITY-ST-ZIP         CORAL GABLES FL 33158         5.4 CITY-ST-ZIP         Change         Addition           NAME         DELETE         6.1 TITLE         Change         Addition	NAME			4. 2 NAME			
TITLE         D         DELÉTE         5.1 TITLE         Change         Addition           NAME         PALENZUELA, GONZALO JR         5.2 NAME         5.2 NAME         5.2 NAME         5.3 STREET ADDRESS         CITY-ST-ZIP         CORAL GABLES FL 33158         5.4 CITY-ST-ZIP         5.4 CITY-ST-ZIP         Change         Addition           NAME         DELÉTE         6.1 TITLE         Change         Addition	STREET ADDRESS	<del>-</del>		4.3 STHEET A	NODRESS		
NAME         PALENZUELA, GONZALO JR         52 NAME           STREET ADDRESS         1212 MANATI AVENUE         5.3 STREET ADDRESS           CITY-ST-ZIP         CORAL GABLES FL 33158         5.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE           NAME         62 NAME					- ZiP		
STREET ADDRESS         1212 MANATI AVENUE         5.3 STREET ADDRESS           CITY-ST-ZIP         CORAL GABLES FL 33158         5.4 CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE           NAME         62 NAME         Change	[	_	☐ DELETE				☐ Change ☐ Addition
CITY-ST-ZIP         CORAL GABLES FL 33158         5.4 CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE           NAME         62 NAME	1 1						
TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         62 NAME	1 1			1	ì		
NAME 62 NAME		CUTAL GABLES PL 33156	Lonete		- ZIP		Channa Addition
	]		_ otten				CHOMBE CHARDING
	STREET ADDRESS				ADDRESS	· ·	

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 oath; that I am an officer or director of the corporation or (the coceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 15 or change of the component with an address.

P DECOMPOSION

Ididas V

**FILED** 

Sep 03 1997 8:00am

Secretary of State