FILE NOW: FILING PROFIT CORPORATION ANNUAL REPORT 1997		FEE AFTER	TER MAY 1 IS \$550.00 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Socretary of State DIVISION OF CORPORATIONS		FILED May 14 1997 8:00a Secretary of State			
	ENUE	IC, Mailing 30 S.W	(2) Address 23 AVENUE FL 33135-1520					
					<ol> <li>Date Incorporated or Qualifi 09/25/1987</li> </ol>		te of Last R 1/1996	eport
Principal Pi	lace of Business	2a. Ma 26	ling Address		4. FEI Number 59-2854309			plied For
Suite, Apt. (	#, etc.	Šui	te, Apt. #, etc.		5. Certificate of Status Desired		\$8.75	
City & State	9	27 City	/ & State		6. Election Campaign Financin		Fee Re \$5.00	· · · · · · · · · · · · · · · · · · ·
		28		0	Trust Fund Contribution		Added t	to Fees
Zip	Country 25	Ζφ <b>29</b>		Country 30	8. This corporation has liability Florida Statutes     10. Name and Address of New	🗶 Yes 🗌	] No	. 199.032,
				++			85 Zip (	
GNATURE					rporation submits this statement for t alion's board of directors. I hereby a			Code s registered registered
IGNATURE	Signature, typed or printed name of reg OFFICE		licable (NO			DATE	changing it bintment as	s registered registered
GNATURE 2. LE ME REET ADDRESS	Signature, typed or printed name of reg OFFICE PDS PIEDRA ALFREDO 30 SW 23 AVE	istered agent and little if app	licable (NO	Itos, the above-named co authorized by the corpor forida Statutes. It. Angistered Agent signature req 13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS	ured when re-installing)	DATE	changing it bintment as	s registered registered
GNATURE LE NE REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS	Signature, typed or printed name of reg OFFICE PDS PIEDRA ALFREDO	istered agent and little if app	licable (NO RS	Itos, the above-named co authorized by the corpor forida Statutes. IE Brigistered Agent signature reg 13. 11 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ured when re-installing)	DATE	changing iti biritment as DIRECTOR	s registered registered
GNATURE LE ME REET ADDRESS Y-ST-ZIP LE REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS	Signature, typed or printed name of reg OFFICE PDS PIEDRA ALFREDO 30 SW 23 AVE	istered agent and little if app	icable (NO 15 DELETE	Itos, the above-named co authorized by the corpor forida Statules. IE Registered Agent signature reg 13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2.1 TILE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-S1-ZIP 3.1 TILE 3.2 NAME 3.3 STREET ADDRESS	ured when re-installing)	DATE	changing it pintment as DIRECTOR	s registered
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SINATURE	Signature, typed or printed name of reg OFFICE PDS PIEDRA ALFREDO 30 SW 23 AVE	istered agent and little if app	Incanik (NC)	Itos, the above-named co authorized by the corpor forida Statules. IE Registered Agent signature req 13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2.1 TILE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-S1-ZIP 3.1 TILE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-S1-ZIP 4.1 TILE 4.2 NAME	ured when re-installing)	The purpose of compose of compose of approximately the approximately compose of the approximately compo	Changing it changing it change DIRECTOR Change Change Change Change	s registered registered IS IN 12