FILE	NOW: FILING FE	E AFTER	MAY 1 IS	\$225.00		
F COR ANNU	PROFIT PROPITION IUAL REPORT		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			
DOCUMENT # M62		2648 (4)				
CHATI	Name BURN INVESTMENTS, II	NC.	( )			
D 100						
Principal Place of Rusiness 8020 NW 167TH TERRACE MIAMI FL 33016		Maling Address 7980 w 25th Court Hialeah Fl 33016 US				
		,			3. Date Incorporated or Qualified 11/16/1987	<b>3a.</b> Date of Last Report <b>04/20/1995</b>
- 2. Ponograf Pla 21]	ce of Business	2 <b>a</b> , Mailing <b>26</b>	j Address		4, FEI Number 65-0032280	Applied For Not Applicable
Suite. Apt #	, etc.		Apt. ⊭. etc.	- 6°40 %	5. Certificate of Status Desired	\$8.75 Additional Fee Required
Oity & State 23		Oity & <b>28</b>	State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζφ <b>24</b> ]	Country 25	Ζη: <b>29</b> ]		Gountry 30	8. This corporation has liability for in Florada Statutes    Yes	ntangible tax under si 199.032, No
	g. Name and Address of Cui	rent Registered A	gent	81 Name	10. Name and Address of New R	egistered Agent
	ERRY, MARGIE				ress (P.O. Box Number is Not Acceptable	e)
7980 W	' 25 CT H FL 33016			83		
INVELL	1112 00010			84 City		Ter Ze Code
	70	228 T TTT 8 TTT				FL 85 Zip Code
or registere familiar with	the provisions of Sections 607.0 diagent, or both, in the State of F n, and accept the obligations of, S	507 and 507 1508. Iorida: Such changi Iochuri 607.0505, E	Horida Statutes, e was authonzed lorida Statutes.	the above-named corpor by the corporation's boa	ration submits this statement for the purp rd of directors. I hereby accept the appo	uose of changing its registered office introduced introduced as registered agent. I am
SIGNATURE	By 3t zer typyst or perfect near molessysteems		(NO)11	Respiratorical Agent's signaturi, respira	d when report ring	DATE
12.	OFFICERS PST	AND DIRECTORS	T DELETE	13.	ADDITIONS/CHANGES TO OFFI	
NAMÉ :	WESTBERRY, MARGIE	L	_] Direct	1 1 THUE 12 NAME		Change Addition
STREET ADDRESS	7980 W 25 CT			13 STREET ADDRESS		
011+\$1+7+	HIALEAH FL			* 4 CiTY - \$1 - 7iP		
T-T-(F		]	DELETE	2 1 Till !		Change Addition
NAMt				2.2 NAME		
STREET ACORESS				2.3 STREET ADOPESS		
Ch St 77		r	DELETE	2.4 C(IY-SI-Z)F 3.1 T(ILE		Change Addition
NAV:		L		3 2 NAME		Change Addition
STREET ADDRESS				3.3 STREET ACORESS		!
C#1 \$1 21F				3.4 CITY - ST - ZIF		
TIFLE			DELETE	4 1 TITLE		Change Addition
NAM:				4.2 NAME		
STREET ADJRESS				4.3 STEEFT ADDRESS		
Cifn ST Zif	P 15 . M		There is a second	4.4.CHT* - ST - ZIP		
NAME		L	] DELETE	5 1 DILE		Change Addition
STREET AT ORESS				5.2 NAME 5.3 STREET ACORESS		
City S1-2i6				5.4 CI / Y - S1 - ZIP		
TillE		· · · · · · · · · · · · · · · · · · ·	DELFIE	6 1 TITLE		☐ Change ☐ Addition
NAME				6.2 NAME		
STEEL ALTORESS				6.3 STREET ADDRESS		
D15 - ST - 7/2				6.4 DITY ST 710		

14. Edu hereby cert by that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. Hurther certify that the information indicated on this annual report is rup lemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee 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.

SIGNATURE:

\*\*SIGNATURE\*\*

\*\*SIGNATURE\*\*