## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997

appears in Block 12 or Block

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 04 1997 8:00am

Secretary of State

305-444-6716

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # M69197

(5)

POINCIANA DEVELOPERS, INC.

Principal Discu	e of Dusiness	Mailing Address				
Principal Place of Business Mailing Address						
3971 SW 8TH STREET SUITE 205 MIAMI FL 33134		% rene f. Larrieu 3971 S.W. 8TH ST., STE, 205 Miami fl. 33134-2850				
US					<ol> <li>Date Incorporated or Qualified 02/22/1988</li> </ol>	3a. Date of Last Report 02/22/1996
2, Principal Pl 21	lace of Business	2a. Mailing Address 26			4. FEI Number 65-0127357	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	**************************************		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Ζφ	Country	Zφ	Countr	1	8. This corporation has liability for in	·
24	25	29	30			Yes No
	<ol><li>Name and Address of Curren</li></ol>	t Registered Agent		·	10. Name and Address of New Reg	istered Agent
	izalez, nitza		81	Name		
3971 SW 8 STR			82	82 Street Address (P.O. Box Number is Not Acceptable)		
STE	205		oli oli oli va			
MIAN	VII FL 33134	83				
			84	City		or Zin Code
				"		FL 85 Zip Code
11. Pursuarit t office or re agent it ar	to the provisions of Sections 607.050 egistered agent, or both, in the State or familiar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida Such change was itions of Section 607.0505, F	ites, the above authorized beforida Statute	e-named y the cor s.	corporation submits this statement for the pupporation's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
SIGNATURE						
	Signature, typed or printed name of registered age		TE: Registered Ag	ent signature	required when reinstating)	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	
TITLE	VSD	[] DELETE	1.1 TITLE			Change Addition
NAME	LARRIEU, JORGE A.		1.2 NAME			
STREET ADORESS	3971 SW 8TH ST., STE.205		1.3 STREE	ADDRESS		
CITY-ST-ZIP	MIAMI FL	B.C. Pite	1.4 CITY -	ST - ZIP		
TITLE	PTD	L_I DELETE	2.1 TITLE			Change Addition
NAME	LARRIEU, MANUEL A.		2.2 NAME			
STREET ADDRESS	3971 SW 8TH ST., STE.205		2.3 STREE	ADDRESS		
CHT-ST-ZIP	MIAMI FL	T OF GATE	2. 4 CITY -	ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Assistant Secretary	Change Addition
NAME			3.2 NAME		Nitza Gonzalez	
STREET ADDRESS			3.3 STREE	ADDRESS	3971 S.W. 8 St. #205	
CHY-ST-ZIP		D briefe	3.4. CITY-	ST-ZIP	Miami, FL. 33134	
TITLE		☐ DELETE	4.1 TITLE		• • • • • • • • • • • • • • • • • • • •	Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE			
CHY-ST-ZIP		Driver	4.4 CITY-1	ST-ZIP		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME PEDEST ASSESSED			5.2 NAME			
STREET ADDRESS			5.3 STREE			
C:TY - ST - ZiF		Drieve	5.4 CITY-1	ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			:
STREET ADDRESS			6.3 STAEE	ADDRESS		
C(TY-ST-7IP	and the last the last	4.0	6.4 CITY-	T-ZIP		
information I am an of	by certary that the information supplied in indicated on this annual report or si ficer or director of the comparation or	i with this filing does not qua applemental annual report is the receiver or trustee empo	iny for the exe true and acc wered to exec	emption surate and oute this i	tated in Section 119.07(3)(i), Florida Statutes. I that my signature shall have the same legal report as required by Chapter 607, Florida Sta	. I further certify that the effect as if made under oath; that atutes; and that my name