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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY ST-ZIE

appears in Block 12 or Block

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Jan 28 1997 8:00am

1 - 3 - 91 (305)220 (835 Date Dayline Phone W

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M82938

(5)

BICHARA & CEBALLOS, P.A.

Principal Place of Business Mailing Address 1405 SW 107 AVENUE #301A 1405 SW 107 AVENUE #301A MIAMI FL 33174-2520 MIAMI FL 33174 3. Date Incorporated or Qualified 3a. Date of Last Report 05/25/1988 01/26/1996 2. Principal Place of Business 4. FEI Number 2s. Mailing Address Applied For 21 65-0049408 26 Not Applicable Suite, Apt. #, ctc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Г Added to Fees Zip Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CEBALLOS, GUSTAVO 1405 S.W. 107 AVE., 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 301A 83 **MIAMI FL 33174** 84 City 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, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with land accept the obligations of. Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pentert race of registe oil agent and life it applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition TOLE 1.1 TITLE Change BICHARA, RICARDO NAME 1.2 NAME 1405 SW 107 AVE. #301A STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY ST-ZIF 1.4 CITY - ST - ZIP TITLE DELETE 2.1 TITLE Change Addition CEBALLOS, GUSTAVO 2.2 NAME 1405 SW 107 AVE. #301A STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL OTY - \$1 - 70 2.4 CITY - ST - ZIP DELETE me 3.1 7/11/6 ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS OTH-ST-ZIP 3.4 CITY - \$1 - ZIP DELETE Addition TITLE 4.1 TITLE Change NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIF 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAMi 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-2IF 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

information indicated on this amount report or supplemental 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 this provision or the receiver or tystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

14. I do hereby certily 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