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Mar 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N22490** (9)

1. Corporation Name
**FEDERACION SINDICAL DE LAS PLANTAS ELECTRICAS, G
AS Y AGUA, INC.**



Principal Place of Business 74 NW 22 AVE MIAMI FL 33125 US		Mailing Address AS Y AGUA, INC P O BOX 451132 MIAMI FL 33245 US		3. Date Incorporated or Qualified 09/15/1987	
2. Principal Place of Business 21 74 NW 22 Ave.		2a. Mailing Address 26 FEDERACION SINDICAL PLANTAS ELECTRICAS		4. FEI Number 65-0010155	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27 945 X AVE INC.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
City & State 23 MIAMI FLORIDA		City & State 28 P.O. BOX 451132 MIAMI		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip 24 33125	Country 25 U.S.	Zip 29 33245	Country 30 US	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

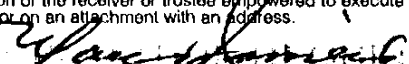
9. Name and Address of Current Registered Agent ✓ DIAZ, RENE L 350 TAMAMI BLVD MIAMI FL 33144		10. Name and Address of New Registered Agent	
81 Name			
82 Street Address (P.O. Box Number is Not Acceptable)			
83			
84 City		85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <input checked="" type="checkbox"/>	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIAZ, RENE L	1.2 NAME	
STREET ADDRESS	350 TAMAMI BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33144	1.4 CITY-ST-ZIP	
TITLE <input checked="" type="checkbox"/>	TD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JIMENEZ, MARIO A	2.2 NAME	
STREET ADDRESS	9455 SW 6 TERRACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33174	2.4 CITY-ST-ZIP	
TITLE <input checked="" type="checkbox"/>	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAMPOS, CALIXTO	3.2 NAME	
STREET ADDRESS	205 TAMAMI CANAL ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33144	3.4 CITY-ST-ZIP	
TITLE <input checked="" type="checkbox"/>	S	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHIRINO, GEORGINA	4.2 NAME	
STREET ADDRESS	14947 SW 89 ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33196	4.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/>		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	VT GIL MATEO ACOSTA
STREET ADDRESS		5.3 STREET ADDRESS	1701 SW 125 CT.
CITY-ST-ZIP		5.4 CITY-ST-ZIP	MIAMI FLA. 33175
TITLE <input type="checkbox"/>		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:  2-24-98 JTS-3116

CR2E037 (10/97)