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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 10 1997 8:00am

Secretary of State

1/29/97 305 477 3861

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P18078

(6)

CULTURAS DEL SOL, INC.

Lam an officer or director of the comppears in Block 12 or Block 13 if c

SIGNATURE:

Principal Place of Business Mailing Address				THE HEALTH IN THE BEST BOTH BOTH IN THE STATE OF THE CHAIN ALL AND THE STATE OF THE				
7311 NW 12 S MIAMI FL 3312		7311 NW 12 ST #5 MIAMI FL 33126-1924						
					3. Date Incorporated or Qualified 02/19/1988	3a. Date of La	•	
2. Princ pal Place of Business		28. Mailing Address 26. Sane a dore			4. FEI Number		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					Not Applicable	
22	n, etc.	27 Suite, Apr. #, etc.			5. Certificate of Status Desired	1 1 * * *	75 Additional se Required	
City & Stat	0	City & State			6. Election Campaign Financing			
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Counti	У	8. This corporation has liability for in		der s. 199.032,	
24	25		30			Yes No		
	9. Name and Address of Curren	t Registered Agent		T N	10. Name and Address of New Reg	Istered Agent		
	K, ROCHELLE		8		sure			
7311 NW 12TH ST S				82 Street Address (P.O. Box Number is Not Acceptable)				
MIA	MI FL 33143		8:			· · · · · · · · · · · · · · · · · · ·		
			0.	'				
	•		84	City		FL 85	Zip Code	
11. Pursuant	to the provisions of Sections 607.0503	2 and 607,1508. Florida Statute	es the above	ve-named corr	poration submits this statement for the po	rnose of chang	ing its registered	
office or r	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida, Such change was a	uthorized b	by the corpora	tion's board of directors. I hereby accep	t the appointmen	nt as registered	
SIGNATURE	Signature, typied or publied name of registerna agei	Arres			red when reinstating)			
12.	OFFICERS AND		13.	gent signature requi	ADDITIONS/CHANGES TO OFFICE	DATE FRS AND DIREC	TORS IN 12	
TITLE	P	☐ DELETE	11 TITLE			☐ Cha		
NAME	BECK, ROCHELLE		1.2 NAME	i i				
STREET ADORESS	7235 SW 54 AVE		1.3 STREE	T ADDRESS				
CITY - ST - ZIF	MIAMI FL		1.4 CITY -	ST-ZIP	· 			
TITLE	V	DELETE	2 1 TITLE	1 1	UNIN HEALY	Cha	nge Additio	
NAME	BORN, TERRY		2 2 NAME		110 L	ane.		
STREET ADDRESS	54 E. 11 STREET, 9TH FL		2 3 STREE	T ADDRESS	YNN HEALY 1439 S.W. 110 L MIMM FL.331	- /-		
CITY-ST-ZIP	NEW YORK NY		2 4 CITY	-ST-ZIP	MIAM 12.33/			
TOLE	DECK CALMIE	DELETE	31 TITLE	1		L Cha	nge L. Additio	
NAME	BECK, SAMUEL 18 BRIGHTON 3RD RD		3 2 NAME					
STREET ADDRESS	BROOKLYN NY			T ADDRESS				
CITY-ST-ZIF TITLE	C DOUNLIN INT	DELETE	3 4. CITY			[] AL.	ngo talabia	
NAME:	BECK, CHARLOTTE	ריי הנינונ	4.1 TITLE			L Cha	nge 🔲 Addition	
STREET ADDRESS	18 BRIGHTON 3RD RD.		4. 2 NAM	et address				
CITY - ST - ZII	BROOKLYN NY							
TITLE		DELETE	4.4 CHTY-			Cha	nge Addition	
NAME			5 2 NAME		70000208 -02/11/970104	3397		
STREET ADORESS				T ADDRESS	-UZ/11/9/0104	13~-005		
CITY - ST - ZIF			5 4 CiTY		***165.00			
TULE		DELETE	6.1 TITLE			Cha	nge Addition	
NAME			6.2 NAME			•		
STREET APORESS			63 STREE	T ADDRESS		. ۸	A(A)	
fully fill he						<i>11/5</i>	210	

14. Ho hereby certify if at the information supplied with this bling 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 corporate or the receiver or trustee empowers to execute this report as required by Chapter 607, Florida Statutes; and that my name