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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Feb 18 1997 8:00am Secretary of State

DOCUMENT #	P920000091	56 (0)

		Mailing Address P.O. BOX 162451 MIAMI FL 33116-2451			
			· ·	3. Date Incorporated or Qualified 12/04/1992	3a. Date of Last Report 04/17/1996
2. Principal F	lace of Business	2s. Mailing Address	······································	4, FEI Number 65-0375697	Applied For Not Applicable
Suite, Apt	#, elc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Sta	te	City & State		6. Election Campaign Financing	\$5.00 May Be
3	Country	28	Country	Trust Fund Contribution	Added to Fees
Ζιρ 24	Country 25	Zip	Country	8. This corporation has liability for Florida Statutes	intangible tax under s. 199.032,
31	9. Name and Address of Curr		1001	10. Name and Address <u>of New Re</u>	
	IAS, VICTOR F JR		81 Name	ENAS STETOR	GR
	38 SW 148 CT. MI FL 33177		82 Street Ax	dress (P.O. sox Number is Not Acceptal	ble)
•			83		\
			84 City		FL 85 35786
	to the provisions of Sections 607.0 reg stered agent, or both, in the Sta am familiar with, and accept the obl	502 and 607.1508, Florida Statu ite of Florida. Such change was gations of, Section 607.0505, F	iles, the above-named cor authorized by the corpora lorida Statutes.	poration submits this statement for the ation's board of directors. I hereby acce	purpose of changing its registered pt the appointment as registered
11. Pursuant office or agent 1: SIGNATURE	to the provisions of Sections 607.06 registered agent or both, in the Statem familiar with, and accept the oblining the statement of the state		tles, the above-named cor authorized by the corpora foricia Statutes.		purpose of changing its registered pt the appointment as registered
SIGNATURE	Signature, typed or printed having of registered a OFFICERS A	agent a kt tille if applicable (NO ND DIRECTORS	of E Registered Agent signature request.	uved when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTORS IN 12
SIGNATURE 12. HILE	Signature, speed or printed having of registered a OFFICERS A	agencia ktitile if applicable (NO	PTE Registered Agent signature required. 13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFIC	DATE
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of regioned a OFFICERS A PD SEIJAS, VICTOR F JR	egen: a set title if applicable (NO ND DIRECTORS DELETE	113. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTORS IN 12 Change Addition
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. I do 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 flue 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 empower directors this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, if on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-14-97 212-980