## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

1	1996	•		1135		N OF CORP		ONS					
DOCUN 1. Corporation	Name				14418	(7)							
BUNKE	ers del	. CARI	BE CORPO	RATION	1								
Principal Place	of Business			Ma	niling Address								<b>9</b> 1 10 <b>0</b> 01 1011 1001
13790-B S.W.	. 56 ST.				13790-B S.W. 56	ST.							
BOX 14	436				BOX 14								
MIAMI FL 33					MIAMI FL 33175	,			3. Date Incorporated or 12/18/1992	Qualified	3a. Date o	1 Last Re <b>/01/19</b>	•
2. Principal Pla	ce of Busine	<b>8</b> 58		<b></b> -	Mailing Address	S			4. FEI Number			ļ	Applied For
Suite, Apt. #	oto.			26	Cuito Aest & o				65-0377803				Not Applicable
30(6, Apr. #	, etc.			27	Suite, Apt. #, e	ic.			5. Certificate of Status D	esired			Additional Required
Crty & State				28	City & State				6. Election Campaign Fir Trust Fund Contributio	-		\$5.0	May Be
Žip		Co	untry		Zip		Country		8. This corporation has li	<b>a</b> bility for i	ntang ble tax i	under s	199.032.
<u> </u>		25		29		30			Florida Statutes	N XeS	□No		
	9. Name	and Ac	dress of Curre	ent Regist	tered Agent		81	Name	10. Name and Address	OPNON H	egistered Ag	ent	
	00 14401									<u> </u>			
CALLAD							82	Street Add	fress (P.O. Box Number is Not	Acceptab	le)		
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14. I do hereby certify that the information supplied with this filing is voluntarly furnished and does not qualify for the exemption stated in Section 119.07(3;k), 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 logal price as if made under oath, that I am an officer or firestor of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: MACI PALL CAME OF SIGNIF OF DIRECTOR