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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

P93000014699 (1)

1. Corporation N		CO. OF MIAMI, INC.			
Principal Place o	f Burinose	Mailing Address		1	ist mania mangal demen sanga manak tanak nang nang
6520 SW 16 TRR. STE160		6520 SW 16 TRR. -STE:-160			
MIAMI FL 33 US	1130	MIAMI FL 33155 US		3. Date fricorporated or Qualified 02/26/1993	3a. Date of Last Report 05/01/1995
2. Principal Place of Business 2a 21 26		2a, Mailing Address 26		4. FEI Number 65-0393810	Applied For Not Applicable
Suite, Apt. #, etc. 27		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 28		City & State		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zip 24]	Country 25 9. Name and Address of Curre		Country 30	This corporation has liability for life Florida Statutes Name and Address of New R	XINO
82 Street A 3401 NW 3RD ST. MIAMI FL 33125 84 City				odress (P.O. Box Number is Not Acceptable) CO SLO LO TEL TEL B5 Zip Code 33155	
or registere familiar with SIGNATURE	d agent, or both, in the State of Flor	ida, Such change was authorized stion 607,0505, Florida Statules. ntano tro-t applicable (NOTE: NO DIRECTORS)	by the corporation's b Registered Agent signature re 13.	poard of directors. Thereby accept the app	DATE DATE DOTE DOT DOT
TITLE NAME STREET ADDRESS	P RIJOS, PEDRO JR 3401 NW 3RD STREET	[]] DELEIE	1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS	6520 Sw 16 Terr	Change Addition
CITY-ST-ZIP	MIAMI FL 33125		1.4 CITY- S1- ZIP	West Miani, fl 3	53155
TITLE	VP	☐ DELETE	2 1 TITLE		Crange Addition
NAME STHEET ADDRESS	RIJOS, ANNA A 3401 NW 3RD STREET		2.2 NAME 2.3 STREET ADDRESS	6520 512 16 Ferr	,
CITY-ST-ZIP	MIAMI FL 33125		2.4 CHY-S1-ZIP	West Mia, FC 33	156
TITLE		[] DELETE	3. 1 TITLE	·	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3. STREET ADDRESS		
C(1Y - S1 - 7)P			3.4 CITY - ST - ZIP		C) Change C Addition
TITLE		DELETE	4. 1 TOTLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		[] DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE			5 1 TITLE		
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
COY-ST-ZIP		DELETE	5.4 CHY-ST-ZIP 6.1 TITLE		Change Addition
TITLE		<u>Г</u> Ј <i>ини</i>			El carello El viscolori
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADORESS 6.4 CHTY-ST-ZIP	•	
I CHY-SI-ZE I			■ 0.5 U111 · 51 · Z0*		

14. I do hereby certify that the information supplied with this filing is voluntarily 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 legal effect as if made under early; that I am an officer or director of this corporation or the receiver or trusted 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 ellipsishment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINCED NAME OF SIGNING OFFICER OR DIRECTOR

Fedro

Rijos Ja. 4-30-96 3052675849