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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

<del></del>	1991									
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Principal Place	e of Business		Mailing Address		<del></del>			<b>.</b>		()
2901 S.W. 8TH			2901 S.W. 9TH STREET			٠.				
SUITE 207 MIAMI FL 3313	DE		SUITE 207 MIAMI FL 33135-2850							
MINIMI I E SOIG	~		W. W. W. C. CO. C.			3. Date Incorporated	or Qualified	3a. Date of L		port
• Discipal D	lace of Business		NA-W- Ad-			03/22/1993		08/16/19		
2. Principal P	IRCe of Business	20	2a. Mailing Address			4, FEI Number 65-0415804		. }_		lied For Applicable
Sulte, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status	Desired		75 A	ditional
City & State	Δ	2	7 City & State					F(	e Req	
23	•	20	¬ '			6. Election Campaign Trust Fund Contribu	•		.UU N Ided to	fay Be Fees
Zip	Country		Zip	Cou	ntry	8. This corporation ha	s liability for in		der s.	199.032,
24	26   9. Name and Addres	21 e of Current Res		[30]		Florida Statutes  10. Name and Addres		Yes No		
PFI	AEZ, FAUSTO L	0 01 00	gistorius regulis		81 Name	10, mante una Abarea	or itom riog	stored Agent		
	1 SW 8 ST.				82 Street A	Address (P.O. Box Number is N	lot Acceptable	9)		
	TE 209			l						
BAI A	MI FL 33135			ľ	83					
MIA				- 1	<b>B4</b> City			FL 85	Zip Co	ode
MIA					1 '					
	to the provisions of Section	ons 607.0502 and	1 607.1508, Florida Statu	utes, the at	oove-named o	corporation submits this staten	nent for the pu	rpose of chang	ing its	registered
	to the provisions of Soctic registered agont, or both, im familiar with, and accep	ons 607.0502 and In the State of Fla pt the obligations	d 607.1508, Florida Statu orida. Such change was s of, Section 607.0505, F	utes, the at authorized lorida Stat	pove-named of by the corputes.	corporation submits this staten paration's board of directors. If	nent for the pu nereby accept	rpose of chang the appointme	ing its nt as re	registered egistered
11. Pursuant i office or r agent. I a							nent for the pu nereby accept		ing its nt as re	registered ogistered
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