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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED 97 MAR 28 AM 10: 57

	SOUTH INVESTMENTS,	• •			SECRETARY OF S TALLAHASSEE, FL		
Principal Place of Business 701 BRICKELL AVENUE SUITE 850 MIAMI FL 33131		Mailing Address 701 BRICKELL AVENUE SUITE 850 MIAMI FL 33131-2851		-	ALIA OCINO MON PIOTO ONNE TON	<b>14 15</b> 01 1 <b>64</b> 1	
					<ol> <li>Date Incorporated or Qualified 04/02/1993</li> </ol>	d 3a, Date of Last F 08/12/1996	₹eport
2. Prescipal f	Place of Business	2a. Mailing Address		1	4. FEI Number	<del></del>	pplied For
21	- , , ,	26 Suite Apt # sta		····	65-0406285		ot Applicable
Suite, Apt	! #, €10.	Suite, Apt. #, etc.			5. Certificate of Status Desired	7	Additional legulred
City & Sta	ılé	City & State		····	Election Campaign Financing     Trust Fund Contribution	\$5.00	) May Be to Fees
Ζιρ <b>24</b>	Country 25	Ζφ 29	Country 30		8. This corporation has liability for Florida Statutes		
24]	g, Name and Address of Cu				10. Name and Address of New I		
	LLIVAN, JOHN F JR		81	Name			
	BRICKELL AVENUE		82	Street Addr	ress (P.O. Box Number is Not Accept	table)	The same of the sa
	ITE 850		83		UIJUUC -03728	79701144	117
MIP	NMI FL 33131		<u></u>			95,00 ****1	
			84	City		FL 85 Zip	Code
SIGNATURE  12.	Squadre Types De penind name of regisest OFFISCERS	d agent and the if applicable (No AND DIRECTORS	OTE: Begistered Age 13.	nt signature requir	red when renstating)  ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTOR Display	RS IN 12
NAME	ALLERA FRUIDA		1.2 NAME				L_ Noomo.
STREET 450FFSS	AND DESCRIPTION OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE		1.3 STREET	ADDRESS			,
CITY - ST - ZIP	MIAMI FL 33131		1.4 CITY-S	[+ZiP			
THEF	VP	DELETE 2.1				Change	Addition
NAME PARKET ADODUCE	PUELLES, MERCEDES ADDRESS 701 BRICKELL AVENUE SUITE 850		2.2 NAME	1500c00	1		
STREET ADORESS CDY: \$1-200	MIAMI FL 33131	JIIE 000	2.3 STREET 2.4 CITY-S				
Titte	Manu I C Acial	☐ DELETE	31 TITLE	1-211		Change	☐ Addition
NAME		. 32					
STREE: ADDRESS			3.3 STREET	ADDRESS			
C 14 - ST - ZIF			3.4. CITY- S	it - ZIP		Change	T Addison
Till(f		DELETE	4.1 TITLE 4.2 NAME			L Change	Addition
- NAVÉ - STREET ADDRESS			4. 2 NAME 4.3 STREET	ADDRESS			
CITY - ST-761			4.4 CITY-S	· · · · · · · · · · · · · · · · · · ·			
DITE		DELETE	5.1 TITLE	<u></u>		Change	Addition
HAME			5.2 NAME	)			
STREET LADORESS	1		53 STREET	ADDRESS	<b>A</b>	^	
C(1) v - 5.1 - 20P			5 4 CITY-S	T - ZIP		$\Omega = \Omega$	
TITLE		☐ DELETE	61 TITLE		19# d	M	Addition
NAME CONTACT ADDITIONS			6.2 NAMÉ 6.3 STREET	Annacce	\ <i>\</i> \\	171	
STREET ADDRESS	1			ľ	VA C	<b>3</b>	
OTC SLZIF			6.4 CITY-S	1-EIF	- in Continue 440 07(0)()		

14. Ido 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 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 corporation or the ready 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 if an attachment with an address.

SIGNATURE: Eduardo Santos Director/President/Secretary/Treasurer 3/14/97 305–381–8340

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Priorie #