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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000026375

1. Corporation Name

ACH Associates of Florida, INC

Principal Place of Business

Mailing Address

10221-SW-103RD CT / 10221-SW-103RD CT
MIAMI, FLA, 33176 / MIAMI, FLA
33176

REINSTATEMENT 98

2. Principal Place of Business

2a. Mailing Address

21 10221-SW-103RD CT

26 10221-SW-103RD CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 MIAMI, FLA, 33176

28 MIAMI, FLA-33176

Zip

Country

Zip

Country

24 33176

25 MIAMI-DADE

29 33176

30 MIAMI-DADE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RODRIGO SUAREZ
435 HIALEAH DRIVE, suite 11
HIALEAH, FLA

81 Name Miguel Xiques
82 Street Address P.O. Box Number is Not Acceptable
16405-NE-22ND AVE
83
84 City North Miami Beach, FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ROSEN MARRERO / Vice-President
NAME 1134-NW-58TH AVE
STREET ADDRESS HIALEAH, FLA 33012
CITY-ST-ZIP

1.1 TITLE President
1.2 NAME Reynaldo CABAZA
1.3 STREET ADDRESS 86-E-25 ST, HIALEAH, FLA 33012
1.4 CITY-ST-ZIP

TITLE DAYMINE MARRERO / Vice-President
NAME 1134-NW-58TH AVE
STREET ADDRESS HIALEAH, FLA
CITY-ST-ZIP

2.1 TITLE Secretary/Treasurer
2.2 NAME Reynaldo CABAZA
2.3 STREET ADDRESS 86-E-25 ST, HIALEAH, FLA-33012
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS 9000002735809--3
3.4 CITY-ST-ZIP -01/11/99--01005--022

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 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:

Reynaldo Cabaza
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/28/98

Date

(305) 863-9777

Daytime Phone #

CR2E034 (9/96)