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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

SIGNATURE:

14. I do hereby certify that the information supplied with this information indicated on this annual report or supplement I am an officer or director of the corporation or the receip appears in Block 12 or Block 13 if changed, or on a present the corporation or the receip appears in Block 12 or Block 13 if changed, or on a present the corporation of the corporation.

SIGNATURE AND TYPED OR PR



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000032553 (8)

CAZO+JARRO, JACOBS ARCHITECTS, P.A.

FILED Apr 11 1997 8:00am Secretary of State

- X (BŘÍHOČ) 192 (BIHO 1914) EMHI OSIN ÉRIM COMBO (MHE 1988) ÉNÉ ŘIJŠÍ ŘIJŠO (MH 1881)

Principal Place of Business Mailing Address								1000000 114 1011 1141 1011 1011 1014 1014 1141 1141 1141 1141 1141				
3461 SW 6TH ST 3461 SW 6TH ST MIAMI FL 33135 \$-204												
US	MI FL 3313	9			MIAMI FL 33135-4107							
				U\$			f	3, Date Incorporated or Qualified 05/03/1993 Sa. Date of Last Report 02/07/1996				
2. 5	Principal P	lace of Busi	ness	2a. Mailing Address				4. FEI Number		, Ar	oplied For	
21			26				65-0417232	_/		ot Applicable		
Suite, Apt #, etc				Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required				
23	City & State			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
	Zip Country		Zip	Zip Co 29 30		Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
E-71		g, Name	e and Address of Curre			<u> </u>			10, Name and Address of New Re			
	CAZ	O, ARMAN	1DO			81	Name					
	346	1 SW 8TH			82 Street Address (P.O. Box Number is Not Acceptable)							
	MIAI	MI FL 3313	, 5			83						
						84	City			FI	85 Zip	Code
	Purcuant	to the provi	sions of Sections 607.050	02 and 607 1508 Florids	Statutos	the above	e-named	1 cornor	ation submits this statement for the r		changing if	ts registered
11.	office or r	egistered a	gent, or both, in the State	e of Florida Such change	e was auth	orized by	the cor	rporation	ation submits this statement for the p n's board of directors. I hereby accep	ot the app	ointment as	registered
		miranimar v	ли, апо ассерт те овну	jations of, Section 607.0.	JOJ, FIGHU	a Siaiule	ь.					
516	NATURE	Signature type:	d or princed han ie of registered ag	jent and litto if applicable	(NOTE: Re	gistered Age	ent signature	e required	when reinstating)	DATE		
12.			OFFICERS AN	ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		
THLE		P	-	☐ DELE	ETE	1.1 TITLE					Change	Addition
NAM(ESPERANZA			1.2 NAME						
1	E1 ADORESS	MIAMI F	V 8TH ST., S-204		l	1.3 STAEET						
	-ST-ZIP	V	L 33 133	DELE	EYE	1.4 CITY-S	ST - ZIP	 			Change	Addition
THTLE		•	S, ANGELA	L.) VELO	516	2.1 TITLE		1			LI Change	L AUGINORI
NAME	•		V 8TH ST., S-204			2.2 NAME	ADODEAA		•			
1	ET ADDRESS - ST- ZIP	MIAMI F			1	2.3 STREET						
TITLE		ST		DELETE		2. 4 CITY - ST - ZIP 3.1 TITLE		1			Change	Addition
NAME			ARMANDO			3.2 NAME						•••
STREE	E1 ADORESS	3501 SV	V 8TH ST., S-204			3.3 STREET	ADDRESS					
CITY	-ST ZIP	MIAMI F			l	3.4. CITY-	ST-ZIP	.				
TITLE				DELI	ETE	4.1 TITLE		1			Change	Addition
NAM	E				Į	4. 2 NAME		1				
STRE	ET ADDRESS					43 STREET	ADDRESS'	1				
	-S1-7#					4.4 CITY - S	37 - 21P					
DILE	:			DELE	ETE	5.1 TITLE			•		Change	Addition
NAMI						5.2 NAME		1				
STRE	ET ADDRESS					5.3 STREET		1				
	· ST · ZIP				CYE	5.4 CITY - 5	T-ZIP	4			T-1 04 -	A some :
TILLE		l		DELU	ti t	6.1 TITLE		1			Change	Addition

6.2 NAME

6.3 STREET ADDRESS 6.4 City-St-Zip

does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the two fives report is true and accurate and that my signature shall have the same legal effect as if made under oath; that tristee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name