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

PROFIT CORPORATION ANNUAL REPORT 1997

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000038582 (1)

- CARMEN CORBO RODRIGUEZ, P.A.

Principal Pia 1985 NW 86 SUITE 201 MIAMI FL 33	e Tb; C ace of Busines C		Mailing Address 1985 NW 88 CT SUITE 201 MIAMI FL 33172-2638				1 100/1991 (18 10/19 (19)) 09/10 09/10 09/10 09/10 (19) (19) (19) (19) (19) (19) (19) (19)			
US			US				 Date Incorporated or Qualified 05/28/1993 		Date of Last R 5/01/1996	eport
2. Principal	Place of Busin	noss	2a. Mailing Address 26			4. FEI Number 65-0413219			plied For nt Applicable	
22	Suite, Apt. #, etc.			Suite, Apt. #, etc. 27			5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State			City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		
Zip 24		Country 25	Zip 29	30	Countr	У	This corporation has liability for Florida Statutes			
	9, Name	and Address of Curre	nt Registered Agen				10. Name and Address of New R			
CORBO-RODRIGUEZ, CARMEN 1985 NW 88 COURT SUITE 201 MIAMI FL 33172					81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code					
OTICE O	r registered ag I am familiar wi	ent, or both, in the Stat th, and accept the obli- or printed name of registered a	e of Florida. Such ch gations of, Section 60	ange was autho 17.0505, Florida	rized b Statute	y the corpor es.	orporation submits this statement for the ration's board of directors. I hereby acce	opt the ap	ppointment as	registered
12.		OFFICERS AF	ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFF	CERS AN	D DIRECTOR	S IN 12
TITLE	PD			DELETE	I.1 HILE		'		Change	Addition
NAME STREET ADDRESS	s 435 S.W.	RODRIGUEZ, CARME 123RD AVENUE	EN		I.2 NAME I.3 STREE	1 ADDRESS			_ ,	
CITY-ST-ZIP	MIAMI FL	•			I.4 CΠΥ-	ST-ZIP				
TITLE				DELETE ;	2.1 TITLE				Change	Addition
NAME					2.2 NAME					
STREET ADDRESS	s] :	3 STREE	TADDRESS	•			
CITY-ST-ZIP					2.4 CHY-	ST-ZIP				
TITLE				DELETE ;	3.1 TITLE				Change	Addition
NAME				:	3 2 NAME					
STREET ADDRESS	s			:	3 STREE	T ADDRESS				
CITY-ST-ZIP			·.		3.4. CITY-	ST-ZIP			•	
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NAME					I. 2 NAME	:				
STREET ADDRESS	s			4	I.3 STREE	T ADDRESS				
CITY-ST-ZIP					L4 CITY-	ST-ZIP				
TITLE				DELETE 6	.1 THILE				Change	Addition
NAME	ŀ				D NAME					

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 logal 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 it chapted, or on an attachment with an address.

5.3 STREET ADDRESS

5 4 CITY - ST- 2IP

G.1 TITLE

6.2 NAME

DELETE

11/2-12- ()

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FILED

May 14 1997 8:00am

Secretary of State