FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P93000043438 ((9)
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DOCUN 1. Corporation		1000434	38 (S	")							
·	AXI SERVICE, CORP.										
Principal Place	of Business	Maling Addr	ess				-	111 60 111 06 111 15 141 01			
2595 NW 3	7 STREET	8261 NM	8TH ST.								
BAY 11 Miami Fl 33145			APT, 229 MIAMI FL 33126								
US	0170	US	L WIL 0				3. Date Incorporated or C 06/14/1993	ualified 3a. D	ate of Last R 04/25/1		
2. Principal Pla	ce of Business	2a. Mailing A	ddress				4. FEI Number 35-9042267			Applied For	
21 26 Suite, Apt. #, etc.			Suite, Ant. #, etc.				\$9.75 Additional				
22			5510,1411,000			5. Certificate of Status Desired Fee Required					
City & State			City & State				6. Election Campaign Financing \$5.00 May Be				
23] Zip	Country	28	Zip Country				Trust Fund Contribution Added to Fees 8. This corporation has liability or intangible tax under s 199.032,				
24	25	29	30]				Florida Statutes Yes No				
	9. Name and Address of Curr	ent Registered Age	ent		11 N	larne	10. Name and Address of	of New Registere	d Agent		
CANITA	NA, FREDDY			Ĺ						·····	
	IW 8TH ST			В	2 S	treet Addre	ess (P.O. Box Number is Not a	Acceptable)			
MIAMI FL 33145											
				8	4 C	City		F	85 Zı	p Code	
11. Pursuant to	o the provisions of Sections 607.05	02 and £07.1508. Fi	orida Statute:	s, the above	L	ned corpora	ation submits this statement fo	-	_ , ,	registered office	
or registere	ed agent, or both, in the State of Flo h, and accept the obligations of, Se	orida. Such change v	vas authorize	d by the co	грога	tion's board	d of directors. I hereby accept	the appointment	as registered	dagent. Lanı	
SIGNATURE											
12.	Signature, typed or printed han e of registered as OFFICERS A	er, and title if any ficable IND DIRECTORS	low)	E Registered Aq	gent sig	nature required	when reinstating) ADDITIONS/CHANGES	DATE TO OFFICERS A		ORS IN 12	
TITLE			DELETE	1, 1 TITLE			, , , , , , , , , , , , , , , , , , , ,		☐ Change	Addition	
NAME	SANTANA, FREDDY			1.2 NAM							
STREE1 ADDRESS	8261 NW 8TH ST		1.3 STREET ADDRESS			DRESS					
CITY-ST-ZIP	MIAMI FL 33126		DELETE	1.4 CITY		P			C Change	CT Addison	
TITLE		L.J	DELETE	2 1 TITU 2 2 NAM		Ì			Change	☐ Addition	
NAME STREET ADDRESS			23 \$			DEGE					
CITY-ST-ZiP				2.4 CHTY				• .			
TITLE			DELETE	3. 1 TITL		·			Change	☐ Addition	
NAME				3.2 NAM	ΙE						
STREET ADDRESS				3.3. STR	eet ad	ORESS					
CITY-ST-ZIP				3.4 CITY	-ST-Z	IP .					
TITLE			DELETE	4. 1 TITL					Change	Addition	
NAME				4.2 NAM		1					
STREET ADDRESS				4 3 STRE		1					
CITY-SY-ZIP			DELETE	4.4 CITY		IP	ALLEGATION OF AN INCLUDING STATE AND STATE OF THE PRINTED THE		☐ Change	Addition	
TITLE NAME		u	DEELIE	5. 1 THL 5.2 NAM					TT Arrande	[Hadillon	
STREET ADDRESS				5.2 NAN		nress					
CITY-ST-ZIP				5 4 DITY							
TITLE			DELETE	6 1 TITL					Change	Addition	
NAME				6.2 NAM							
STREET ADDRESS				63 STRI		DRESS					
CITY-ST-ZIP				6.4 CITY	· ST-2	IP					
	y certify that the information supplie	d with this filing is vo	duntarily furns				or the exemption stated in Sec	ction 119.07(3)(k),	Florida Statu	ites. I further	

roo hereby certify that the information supplied with this lining is voluntarily formised and does not qualify for the exemption stated in Section 119.07 (5)(k), Florida Statutes, Florida certify that the information indicated on this 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:

Friddy Sanfara (Freddy Santana)
signature and typed on prilited Name of Signing Officer on Director