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

CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE Saridra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

Γ	OCUME		00005007	72 (1)						
	Corporation Nam		00000007	3 (4)						
Pri	incinal Place of P	uringan	M4.2 - Add -		····					
	incipal Place of Business 3191 SW 22 ST STE 617		Mailing Addre 100 SE SE 17 FLOOR	COND ST.						
	MIAMI FL 33145 US			33131-1101		3. Date Incorporated or Qualifi		3a. Date of Last Report 04/03/1995		
	Principal Place o	f Business	2a. Mailing Ac	Idress		07/19/1993 04/03 4. FEI Number			Applied For	
21	Suite, Apt. #, etc	26 te. Apt. #, etc		Suite Apt. #, etc				Not Applicable		
22		27		The state of the s		5. Certificate of Status Desired			Additionat Required	
23	Dity & State		City & Sta	City & State		Election Campaign Financin Trust Fund Contribution	g 🗆	-	0 Мау Ве	
	Zφ	Country		Zip Country		Added to Fees This corporation has liability for intangible tax under s 199,032,				
9. Name		25 Name and Address of C	29 30 30 Of Current Registered Agent			Florida Statutes X Yes No 10. Name and Address of New Registered Agent				
81 Name										
FRIEDHOFF, JOHN H					B2 Street Ado	Iress (P.O. Box Number is Not Acce	VA NS			
	100 SE SECOND AVE 17 FLOOR					Brickell Key	AVISC	# 30	>6	
17 FLOOR 83 MIAMI FL 33131										
•					City	/AI	FL	1	p Code S (S)	
11.					e-named corpo	ration submits this statement for the and of directors. Thereby accept the	purpose of ch			
SIC	familiär with, añ 3NATURE	d accept the obligations of	Section 607.0505, Florid	ia Statutes.	arpentation a box	ind or directors. Thereby accept the	_	_	agent. i am	
	Sk) at i	rentyres or protect name of registere	flagest and the flagson dis-	d ACTE Biografied A	kjerd bygrafine region		DATE	196		
12.		P OFFICER	S AND D RECTORS	ELETE 1 THI		ADDITIONS/CHANGES TO (
NAM	1 '	SERBER, EDUARDO		1.2 NA/			l	Change	Add tion	
STR	EET ADDRESS 4	817 PONCE DE LEON	BLVD.		EET ADDRESS					
		ORAL GABLES FL		14 CIT						
TITLE		,		DEVETE 2.1 DILE		THE STATE OF THE S	[Change	Addition	
NAME					AE					
	EET AODRESS				EET ADDRESS				İ	
TITL	'-ST-7.P E			24 CrT ELETE 3.1 TiT	r-ST-ZIP		·-·	Change	□ Addition	
	IAME			3 2 NA			L	change	☐ Addition	
STA	EET ADDRESS				REFLADORESS					
CITY	-\$1 ZIP				(+S1+20P					
ŢΙΤLΙ	F		D	ELETE 4 1 Tit	.F		[Change	Addition	
NAM	ŀ			4 2 NAM	1¢					
	ET ADORESS				EU ADDRESS					
TITU	-ST-ZIP		Г п	ELETE 5 1 TIT	(-ST-ZiF			7.0	F3 110	
NAM				5.2 NAM			L	Change	☐ Addit₊on	
	ET ADORESS				LET ADDRESS					
CITY	-ST-ZiP				-ST-7IP					
TITLE	1							Change	Addition	
NAM	E			6.2 NAV	Œ		_	-		
	ET ADDRESS			63 SIR	FET ADDRESS					
	- ST ZIP	for that the information	d ad a fire that for a territor	640IN	- ST - ZIP					
14.	oath; that I am a		ranne is report or supplied Torsoration or the receive	renta: annual report is i or frustac en dowere		or the exemption stated in Section 1 de and that my signature shall have is raport as required by Chapter 607				

EDUARDS SERRER-VICE PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

058 F 5 443 7830