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

PROFIT CORPORATION ANNUAL REPORT



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

1996

SIGNATURE:

P93000060300 (9)

1. Corporation	MENT # P9300 Systems, Inc.	0060300 (9)		
Principal Place of Business		Mailing Address		18811801 EUR 18188 ALIIL BANK BEEN GONN DEN	AN BALAN DONAN DUKAN DONAN BUKA NUDI
8250 S.W. 114TH AVENUE MIAMI FL 33173 US		8250 S.W. 114TH AVENUE MIAMI FL 33173 US			
				3. Date incorporated or Qualified 3a. [08/27/1993	Date of Last Report 03/09/1995
2. Principal Pla	ace of Busness	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0434501	Not Applicable
Suite, Apt. #	F. etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 Orty & State		City & State			Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zφ	Country	Zip	Country	8. This corporation has liability for intangible	
24	25	29	30	Florida Statutes Yes No	
	9. Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New Register	ed Agent
FERNANDEZ, DARIO J 8250 S.W. 114TH AVENUE			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
MIAMI FL			83		
			84 City		les 7 code
			- 1		EL 85 Zip Code
S'GNATURE .	Signature the story of the source of report of agent	and the plantage (N	ア め O'E Registered Agent signature required		122/96
12. III.E	OFFICERS AND	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12 Change Addition
NAME	FERNANDEZ, DARIO J		1.2 NAME		T custife T vancou
STELL! ADDRESS	8250 S.W. 114TH AVENUE		1.3 STREET ADDRESS		
ÇOY SEZIP	MIAMI FL 33173		1.4 CITY - SF-ZIP		
11f. F	·	DELETE	2 1 Tille		Change Addition
NAMI			2.2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
CHE STAZIR		☐ DELETE	24 CHY-ST-ZIP 3 1 TITLE		Change Addition
NAME		<u></u>	3 2 NAME		الماسية الماسية
STEEL ASORESS			3.3 STREET ADDRESS		
CHY-S1 ZIP			3.4 CITY-ST-ZIP		
104		□ DELETE	4 1 Title		Change Addition
NAMi Otiva rapidoses			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
OTY SHZP		DELFIE	4.4 GITY- ST-ZIP 5.1 TITLE		Change Addition
NAME			52 NAME		<u>_</u>
SHEEL ASSOCIAS			5.3 STREET ADDRESS		
CITY SINZIP		<u>-</u>	5.4 CHY-ST-ZIP		
TITLE		DELETE	6 1 TITLE		Change Addition
NAME Carrier and Arrest and the			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
14. I do hereby	l y certify that the information supplied t	with this fling is voluntarily furn	64 CITY-ST-ZIP hished and does not qualify for	or the exemption stated in Section 119.07(3)(k),	, Florida Statutes. I further
certify that oath: that f	the information indicated on this annu	ual report or supplemental and pration of the receiver or truste	hua! report is true and accura to emplowered to execute this	te and that my signature shall have the same less report as required by Chapter 607, Florida Sta	eoal effect as if made under

(305) 271-4984