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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



appears in Block 12 or Block 13 if changed, or on an attachment with an address

FLORIDA DEPARTMENT OF STATE

FILED

Feb 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000022322 (9)

RINCON ENTERPRISES, INC.

Sales, Apr. M. cit. Sales, Apr. M. cit.	981 S.W. BTH 8 Miami Fl 33130		981 S.W. 8TH ST. Miami FL 33130-3705								
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2 2 Street Address (P.O. Box Number is Not Acceptable) 4 30 CORAL GABLES FL 33134 4 6 City FL 85 Zip Code 11. Pursuant to the provisions of Scotloris 607 0552 and 607 1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lis register office or registered agent, or both, in the State of Hondie Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent almiliar with, and accept the obligations of Scotloris 607 0505, Florida Statutes. The above-named corporation's board of directors. I hereby accept the appointment as registered agent. Jan Image agent and line in pricative. SIGNATURE SIGNATURE PSTD FINCON, CARLOS H PSTD RINCON, CARLOS H PSTD RINC		9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Re	gistered /	\gent		
# 430 CORAL GABLES FL 33134 # 50 Extra City Full State State City Full State State City Full State State City Full State State City Full State Ful					81	Name					
CORAL GABLES FL 33134 84	2121	PONCE DE LEON BLVD.			82	Street A	ddress (P.O. Box Number is Not Acceptal	ole)			
## City ## Laboration of the provisions of Sections 607 0502 and 607.1508. Florids Statutes, the above-named corporation submits the statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes. ### Signer in the State of Florida Statutes. ### Signer in the State of Florida Statutes. ### OFFICERS AND DIRECTORS ### 17 Name ### DELETE ### Signer in the State of Florida Statutes. ### OFFICERS AND DIRECTORS ### DELETE ### 17 Name ### Signer in the State of Florida Statutes. ### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ### DELETE ### 17 Name ### DELETE ### Signer in the State of Florida State of S											
11. Pursual to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of flore or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent applications of Orthodox of Orth	COR	AL GABLES FL 33134			83						
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Name	office or r	egistered agent, or both, in the Stat	e of Florida. Such change was	authorize	ad by	the corp.	oration's board of directors. I hereby acce	ot the app	ointment as	s registered	
12.	SIGNATURE	Signal vie, typed or printed name of registered as	gent and title if applicable (NO	TE: Registere	ed Age	ent signature r	equired when reinstating)	DATE			
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14. Lide bereful control that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3½). Florida Statutes, Uturber certify that the	CITY-SI-ZiP			6.41	CITY-\$	ST - ZIP					
information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath;	14. I do herel	by certify that the information suppli	ed with this filing does not qua	lify for the	exe	mption sta	ated in Section 119.07(3)(i), Florida Statute	s. I further	certify that	the	