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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P94000027073 (3)

## CASA VERDE CORPORATION

						88/JE JUDIE IARIA BRIJA IERRA (JIJ. 1881	
Principal Place	e of Business	Mailing Address	Mailing Address		i ratirabi in 1814 eren datin Atili dania sitil idani datin datin datin terri		
780 NE 69TH ST Suite 307 Miami Fl 33131		780 NE 69TH ST Suite 307 Miami Fl 33138-5751	SUITE 307				
MINIMI TE OCIO	•	HIVINI (E SOISE OVE			3. Date Incorporated or Qualified 04/04/1994	3a. Date of Last Report 05/01/1996	
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26			65-0480687	Not Applicab	ile
Suite, Apt. #. etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	e	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zıp	Country	Zip	Cou	ntry	8. This corporation has liability for intangible tax under s. 199.032,		
24	25				Florida Statutes XYes No		
		f Current Registered Agent			10. Name and Address of New Reg	Istered Agent	
	BULO, FRANCISCO III			81 Name		· 1	
	NE 69TH STREET MI FL 33138			82 Street Add	lress (P.O. Box Number is Not Acceptable	e)	
muzi	MI 1 E 33 130			83			
				84 City		FL 85 Zip Code	
11. Pursuant office or r agent 1 a	to the provisions of Sections registered agent, or both, in t im familiar with, and accept t	607.0502 and 607.1508, Florida Statuthe State of Florida. Such change was the obligations of, Section 607.0505, F	ites, the all authorize forida Stat	ove-named cor by the corpora utes.	poration submits this statement for the patien's board of directors. I hereby accep	irpose of changing its registere t the appointment as registered	đ
SIGNATURE	Signature, typed or printed name of re-	With rest ages and the dispersionals. (NE	TE Popletors	Amont eigenther son	uired when reinstating)	DATE	- 1
12.		CERS AND DIRECTORS	13.	Agent signature rectu	ADDITIONS/CHANGES TO OFFIC		┈┤
TITLE	D	DELETE	1.1 11	LE J	ADDITIONS OF INVALED TO OFFICE	Change Addition	on
NAME	ANGULO, FRANCISCO		1.2 N	ĺ		<u> </u>	1
STREET ADDRESS	780 NE 69TH ST			REET ADDRESS			
CITY - ST - ZIP	MIAMI FL 33131			TY-ST-ZIP			
TITLE	Š	DELETE	2.1 T)			Change Addition	on
NAME	MARIELA T. ANGULO		2.2 N	,ME		-	
STREET ADDRESS	780 NE 69TH ST 307		2.3 \$	REET ADDRESS			
CITY - ST - ZIP	MIAMI FL 33138			TY-ST-ZIP			
TITLE		DELETE	3.1 TI	····		Change Addition	on
NAME			3.2 N	IME ]			
STREET ADDRESS				REET ADDRESS			
CITY - S1 - ZIP			34.0	ITY-ST-ZIP			
TITLE		DELETE	4.1 TI	ILE		☐ Change ☐ Addition	on
NAME			4.21	AME			}
STREET ADDRESS			4.3 S	REET ADDRESS			
CITY - ST - ZIP				TY+ST-ZIP			
TITLE		DELETE	5 1 TI	<del></del>		☐ Change ☐ Addition	on
NAME			5.2 N	ME			
STREET ADDRESS				REET ADDRESS			ŀ
CITY-ST-ZIP				TY-ST-ZIP			
TITLE		DELETE	617			Change Additi	ion
NAME			62 N	AME			

14. I do hereby certify that the information supplied with this filing does not quality 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 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.

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS CITY - ST - ZIP

**FILED** 

Jan 27 1997 8:00am

Secretary of State