## 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

Principal Place of Business   P.O. BOX 144481   P.O. BOX 144481   CORAL GABLES FL 331144481   CORAL GABLES FL 331144481   CORAL GABLES FL 331144481   3. Date Incorporated or Qualified O6/02/1994	
CORAL GABLES FL 33114-4481  CORAL GABLES FL 33114-4481  3. Date incorporated or Qualified O6/02/1994  4. FEI Number 65-0496781  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Country  Zp  Country  Zp  Country  Zp  Country  Zp  Country  B. This corporation has liability for inflorida Statutes  9, Name and Address of Current Registered Agent  RIVERO, MARIO 6801 N.W. 77TH AVE. SUITE 409 MIAMI FL 33166  81  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the pur 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 appraamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.  Signature  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFF	
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 3. Uite, Apt. #, etc. 3. Suite, Apt. #, etc. 3. Suite, Apt. #, etc. 3. Suite, Apt. #, etc. 4. FEI Number 65-0496781  5. Certificate of Status Desired 5. Certificate of Status Desired 6. Election Campaign Financing 7. Trust Fund Contribution 7. Zip 7. Country 7. Zip 7. Country 7. Zip 7. Country 7. Signature and Address of Current Registered Agent 7. Name and Address of New R  RIVERO, MARIO 801 N.W. 77TH AVE. SUITE 409 MIAMI FL 33166 81 Name 82 Street Address (P.O. Box Number is Not Acceptable Ball Name) 83 Suite Agent in the pure or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appraisal with, and accept the obligations of, Section 607.0505, Florida Statutes.  10. Name and Corporation submits this statement for the pure or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appraisal with, and accept the obligations of, Section 607.0505, Florida Statutes.  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the pure or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appraisal with a prediction of the pure of registered agent and blief as distate.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFF	
2a. Mailing Address 2b. Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Display and Address of Current Registered Agent  RIVERO, MARIO 6801 N.W. 77TH AVE. SUITE 409 MIAMI FL 33166  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation is brinits this statement for the pur familiar with, and accept the obligations of, Section 607.0506, Florida Statutes  SIGNATURE  Signature hyper or protect name of registered agent and titler' as plicative  NOTE Registered Agent signature rearred when rejected agent signature rearred when rejected agent signature paper and determined the registered agent signature rearred when rejected agent signature rearred when rejected agent signature paper and determined of registered agent and titler' as plicative professions. Section 607.0506, Florida Statutes  NOTE Registered Agent signature rearred when rejected agent agent and titler' as plicative profession and titler' as plicative profession and titler' as plicative page agent and titler' as plicative page agent and titler' as plicative profession and titler' as plicative profession and titler' as plicative profession and titler' as plicative page agent and titler' as plicative page agent and titler' as plicative page agent and agent a	3a. Date of Last Report 05/01/1995
Suite, Apt. #, etc.    Suite, Apt. #, etc.     Suite, Apt. #, etc.     27	Applied For
City & State  Country  Zip  Country  Zip  Country  Zip  Country  B. This corporation has liability for it florida Statutes  Florida Statutes  Yes  9. Name and Address of Current Registered Agent  RIVERO, MARIO  6801 N.W. 77TH AVE.  SUITE 409  MIAMI FL 33166  B1 Name  RIVERO, MARIO  682 Street Address (P.O. Box Number is Not Acceptable Based and State Based and State Based B	Not Applicable
City & State    City & State   City & State   28   Country   25   Country   29   30   Country   Clorida Statutes   Yes   Street Address of Current Registered Agent   Street Address (P.O. Box Number is Not Acceptable 801 N.W. 77TH AVE.   SUITE 409   MIAMI FL 33166   84   City     11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the pur 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 apper familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE   Signature typed or printed name of registered agent and billet a splicable   NOTE Registered Agent signature rearred when resistance	\$8.75 Additional Fee Required
Trust Fund Contribution  Zip Country Zip Country  25 29 30 Florida Statutes Pee  9. Name and Address of Current Registered Agent  RIVERO, MARIO  6801 N.W. 77TH AVE.  SUITE 409  MIAMI FL 33166  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the pur 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 apper familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature Typed or printed name of registered agent and tiller a splituble (NOTE Registered Agent signature rearred when resistance)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFF	\$5.00 May Be
Zip   Country   Zip   Country   Zip   Country   Signature   The pure or registered agent   Country   Signature   Signature   Signature   Signature   Specific   Signature   Signature   Signature   Signature   Signature   Specific   Signature   Signature   Signature   Signature   Signature   Signature   Signature   Specific   Sand Signature   Signature   Signature   Signature   Specific   Sand Signature   Signature   Signature   Signature   Specific   Sand Signature   S	Added to Fees
9. Name and Address of Current Registered Agent  81 Name  RIVERO, MARIO  6801 N.W. 77TH AVE.  SUITE 409  MIAMI FL 33166  82 Street Address (P.O. Box Number is Not Acceptable and Interview 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 apper familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  Signature Typed or printed name of registered agent and tiller a printable (NOTE Registered Agent signature research when resistancy)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFF	_ = =
RIVERO, MARIO  81 Street Address (P.O. Box Number is Not Acceptable Solities 409  MIAMI FL 33166  82 Street Address (P.O. Box Number is Not Acceptable Solities 409  83 B4 City  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the pur 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 appearance with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature typed or prited name of registered agent and biller a pilicable (NOTE Registered Agent signature research when resistance).  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFF	□No
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	DATE
NAME RIVERO, MARIO R JR 1.2 NAME	
STREET ADDRESS P.O. BOX 14-4481 1.3 STREET ADDRESS	
CITY-ST-ZIP CORAL GABLES FL 33114-4481 1.4 O4Y-ST-ZIP	
TIBE TD DELETE 2.1 TITLE	☐ Change ☐ Addition
NAME HERNANDEZ, ANA 22 NAME	
STREET ADDRESS 14355 S.W. 42ND TERRACE 23 STREET ADDRESS	
City-S1-ZIP         MIAMI FL 33175         24 City-S1-ZIP           TILLE         SVD         DELETE         3 1 TILLE	Change . Add-tion
NAME ROBBINS, JODEAN 32 NAME	
STREET ADDRESS 4017 SW 10TH ST 33 STHEFT ADDRESS	
CITY-ST-ZIP MAMI FL 34 CITY ST-ZIP	
THE DELETE 4.1 TITLE	Change Addition
NAME 4.2 NAME	
STREEL ADDRESS 43 STREEL ADDRESS	
CITY-ST-ZIP 44 CITY-ST-ZIP	
TITLE 5 THILE	☐ Change ☐ Addition
NAME ( 52 NAME	
STREET ADDRESS 53 STREET ADDRESS	
CHY-S1-2IP 54 CHY-S1-7IP	Change Addition
THLE DELETE 6 I TILE	

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 logal effect as if made under certify that I am an officer or firector 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 are an attrictment with an address.

6.3 STREET ADDRESS

6.4 CITY - S1 - ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Jodean Robbins 3/31/94