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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000044968 (3)

1. Corporation Name

ACD OF SOUTH FLORIDA, INC.



Principal Place of Business

6770 SW 39TH ST  
MIAMI FL 33155

Mailing Address

6770 SW 39TH ST  
MIAMI FL 33155

3. Date Incorporated or Qualified

06/13/1994

3a. Date of Last Report

03/27/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

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30

9. Name and Address of Current Registered Agent

FERNANDEZ, DAVID  
6770 SW 39TH ST  
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name

VICTOR L. RODRIGUEZ

82 Street Address (P.O. Box Number is Not Acceptable)

6800 SW 40 ST. SUITE 135

83

84 City

MIAMI

FL

85 Zip Code

33155

11. Pursuant 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 registered office 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. I am familiar with, and accept, the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

*Victor L. Rodriguez*

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

DP  
FERNANDEZ, DAVID  
6770 SW 39TH ST  
MIAMI FL 33155

DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

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TITLE NAME STREET ADDRESS CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-STATE-ZIP

PRESIDENT  
VICTOR L. RODRIGUEZ  
6800 SW 40 ST. SUITE 135  
MIAMI FL 33155-3708

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-STATE-ZIP

SECRETARY  
JORGE R. FERNANDEZ  
6800 SW 40 ST. SUITE 135  
MIAMI FL 33155-3708

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-STATE-ZIP

TREASURER  
YURI HERNANDEZ  
6800 SW 40 ST. SUITE 135  
MIAMI FL 33155-3708

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-STATE-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-STATE-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-STATE-ZIP

14. I do 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 legal effect as if made under oath; that I am an officer or director of the corporation; 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 included, or on an attachment with an address.

SIGNATURE:

*Victor L. Rodriguez*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305)  
1-16-96 498-5711  
Date Daytime Phone #

CR2E034 (12/95)