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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1996 DIVISION OF CORPORATIONS													
[] 1.	OCUN Corporation	Name		9400									
	ALFON	SO SEP	TIC TAN	(CONTRA	CTOR	i ingelori kar irlek ninti natik na	() 18 (2) 16 (1)		88 12488 NEL 1881				
Pr	rincipal Place o	of Business			Mei		H BRAN OUT I	IIIII HUUI UII	80 (11 03 1111 1 00 1				
	130 SW 51ST	AVE			130 SW 51ST AVE								
MIAMI FL 33134-1283					MIAMI FL 33134-1283								
										3. Date incorporated or Qual-fied 07/12/1994 3a. Date of Last Report 05/16/1995			
	2. Principal Place of Business					2a. Maling Address				4. FEI Number		⊢ -+	Applied For
21					26					65-0567310			Not Applicable
22	Suite, Apt. #, etc				Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional Required
23	City & State	ity & State				City & State				Bection Campaign Financing Trust Fund Contribution		\$5.0	May Be d to Fees
23	L Ζφ		Country	 /		Zip	Co.	mby		8. This corporation has liability for	intangible t		
24	,		25		29		30				s □No		
		9. Name and Address of Current F				legistered Agent				10. Name and Address of New	Registered	Agent	
								81	Name				
ALFONSO, SATURNINO								82	Street Ad	dress (P.O. Box Number is Not Accepta	ble)		
130 SW 51ST AVE MIAMI FL 33134-1283								83	,				
MINMI 1 E 33 134-1200													
								84	City		FL	85 Zi	p Code
11. Pursuant to the provisions of Sections 607,0562 and 607 1508, Florida Statutes. The above named corporation submits this statement for the purpose 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 appoints												anging its	registered office
	or registere familiar with	ed agent, or n, and acce	both, in the pt the obliga	State of Floric tions of, Secti	la Such on 607.0	change was authoriz 1505, Florida Statutes	ed fry the i	corp	oration's bo	ard of directors. I hereby accept the ap-	oointment a	s registered	i agent. i am
s	IGNATURE:												
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1	TREET ADDRESS 130 SW 51ST AVE					135	THEET	ADDRESS					
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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 certify 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.

6.4 City -51-209

6.3 STREET ADDRESS

NAME

STREET ADDRESS

CITY - ST - ZIP

SIGNATURE: X SIGNATURE AND TYPED OR PRINTED THE OF SIGNING OFFICER OR DIRECTOR

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