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

PROFIT CORPORATION ANNUAL REPORT



FI ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1997 POCUMENT # P9400059655 (8)

SEL-AGENCIES, INC.						L MANIMAN WA INGIL NINK BANK BANK BANK ARIN NINK INKA INKA INKA AKAN BIKI MAN				
Principal Place	of Business	Mailing Address	Mailing Address				1 10011001 110 10111 01011 00111 00111	PRINT BILLS IN	ita Bilbi dina	# WILL LOSS
8000 S.W. 56TH ST. Miami Fl 33165		MIAMI FL 33165-6	9000 S.W. 56TH ST. Miami Fl 33165-6643							
US		US					Date Incorporated or Qualified		e of Last R	ieport
Denoted Of	ace of Business	2a. Mailing Addre	000				08/12/1994 FEI Number	<u> </u>	1/1996	1 1
21 21	age or publicas		26				4. FEI Number Applied For 65-0511383 Not Applied			
Suite, Apt. #, etc.			Suite, Apt. #, etc.			-			~-·	Additional
22		27				5.	Certificate of Status Desired			equired
City & State		City & State	r				Election Campaign Financing			May Be
Zip Courtry						Trust Fund Contribution Added to Fees				
24 25		29	····			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
	9. Name and Address of Currer		1				Name and Address of New Re			
MED	INA, PABLO			B1	Name		. '.			
	S.W. 56TH ST.		}	B2 Street Add			O. Box Number is Not Acceptab	le)		
MIAN	AI FL 33173		-	2						
			ľ	B3			i			
			[-	84	City	····		FL	85 Zip	Code
11. Pursuant t	e the provisions of Sections 607.050	02 and 607 1508 Floric	la Statules, the ab	ove	-named corpo	oration	submits this statement for the p	urpose of c	hanging i	ts registered
office or re agent, flan	e the provisions of Sections 607.050 ogistered agent, or both in the State in familiar with, and agcent the oblig	e of Florida. Such chan- lations of, Section 607	ge was authorized 0505: Florida Statu	by ites.	the corporation	on's b	oard of directors. I hereby accep	t the appoi	ntment as	registered
SIGNATURE.	Paoro Meon	read tros					/	-11-	97	
	Single Operary process and entropic ending		(NOTE Registered	Ager	rt signature require		reinstating)	DATE		
12.	OFFICERS AN				Т	A	DDITIONS/CHANGES TO OFFIC		DIRECTOR Change	RS IN 12 Addition
NAME	MEDINA, PABLO	L 1.12	LETE 1.1 TITI 1.2 NA						0.160.90	L Addition
STREET ADDRESS	9000 S.W. 56TH ST.		1		ADDRESS					
CITY-SI-7iP	MIAMI FL		1.4 CIT							
THE		□ DE	DELETE 2.1 TITLE						Change	Addition
NAME			2.2 NAI	ИE						
STREET ADDRESS			2 3 STF	EET A	ADDRESS					
CITY - ST - ZIF	······································		2 4 01		iI - ZIP				T Charge	442000
THE		L_] D£						ı	Change	Addition
NAME STREET ADORESS			3.2 NAI		ADDRESS					
CITY-ST ZIP			3.4 CI							
Ditt		II DI							Change	Addition
NAME			4 2 NA	ME	ļ					
STREET ADDRESS			4.3 STI	REET	ADDRESS					
C!TY - ST - ZIP			4.4 CIT	Y - \$1	T-21P					
TITLE		∐ DE						ι	Change	L Addition
NAME .			5.2 NA							
STREET ADDRESS					ADDRESS					
CITY - ST - ZIP		DE	5.4 C/T LETE 6.1 T/Y		1-217	·······			Change	Addition
NAME		band 104.	62 NA		Ì			`		
STREET ADDRESS					ADDRESS					
CHM-ST-7IP			6.4 CIT							
	by certify that the information supplied indicated on this annual report or									
Lam an of	finer or director of the corporation on Block 12 or Block 4817 Changed of	ir the receiver or truster	e empowered to e.	xeci	ute this report	t as re	quired by Chapter 607, Florida S	tatutes; an	d that my	name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-11-97

305-546-0761

FILED

Jan 17 1997 8:00am

Secretary of State