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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400065883 (8)

3780 MANAGEMENT CORPORATION

May 02 1997 8:00am Secretary of State



| Principal Place | e of Business | Mailing Addi | ress | | | | | | • |
|---------------------------------|---|---|---------------------|---------------------------|-------------------------------|--|--|----------------------|------------|
| 8780 W FLAGLI MIAMI FL 33134 | | 3780 W FLAG Miami FL 331 | | | | | | | |
| | • | | | | | 3. Date Incorporated or Qualified | 3a, Date of | of Last R | eport |
| | | | | | | 09/08/1994 05/01/1996 | | | |
| | ace of Business | 2a. Mailing A | Address | | | 4, FEI Number | | Ar | plied For |
| 21 | | 26 | | | | 65-0522610 Not Applicable | | | |
| Sulte, Apt. #, etc. | | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| City & State | 9 | City & St | ate | | | 6. Election Campaign Financing | | | May Be |
| 23 | | 28 | 28 | | | Trust Fund Contribution | Added to Fees | | |
| Žìp | Country | Zıp | | | / | 8. This corporation has liability for | | | . 199.032, |
| 24 | 25 | [29] | | 10 | . | | Yes 1 | | |
| | 9. Name and Address of Cur | rent Hegistered Age | nt | 81 | Name | 10, Name and Address of New Reg | jistered Age | nt | |
| | ANCOURT, ANA R | | | 6' | Name | | | | |
| | 85 NW 10 LN MIBEACH FL | | | 82 | Street Add | dress (P.O. Box Number is Not Acceptab | le) | | |
| MIN | WI DENOTIFE | | | 83 | | | | | |
| | | | | 84 | City | | —. [6 | 5 Zip | Code |
| | 0076 | 100 - 1007 4100 F | 1. 3.1. 0 | | | | FL | | |
| office or r | to the provisions of Sections 607.0 egistered agent, or both, in the St | ate of Florida, Such o | hange was au | s, the abov thorized b | e-riamed cor y the corpora | poration submits this statement for the pation's board of directors. I hereby accept | urpose of ch I the appoint | anging ii ment as | registered |
| _ | m tamiliar with, and accept the ob | ligations of, Section (| 607.0505, Flori | da Statule | \$. | | | | |
| SIGNATURE | Signature, typed or pointed name of registered | agent and title if applicable | (NO™E: | Registered Ag | ont signature requ | uired when reinstating) | DATE | | |
| 12. | | AND DIRECTORS | | 13. | | ADDITIONS/CHANGES TO OFFIC | | | |
| TITLE | DP | L. | DELETE | 1.1 TOTLE | 1 | | | Change | Addition |
| NAME | BETANCOURT, ANA R | | | 1.2 NAME | | | | | |
| STREET ADDRESS | 3780 W FLAGLER | | | | ADDRESS | | | | |
| CITY-ST-ZIP | MIAMI FL 33134 | · · · · · · · · · · · · · · · · · · · | DELETE | 1.4 CHY-3 | \$1 - ZIP | | | Change | Addition |
| TITLE NAME | | L | Julicit | 2.1 TITLE 2.2 NAME | | | L-1 | Ottarilge | |
| STREET ADDRESS | | | | 2.3 STREET | T ADDDECC | | | | 1 |
| CITY-ST-ZIP | | | | 2.4 CITY- | | | | | |
| TITLE | —— | | DELETE | 31 TITLE | 31-211 | | | Change | Addition |
| NAME | | _ | | 3.2 NAME | | | | - | |
| STREET ADORESS | | | | 3.3 STREE | TADORESS | | | | |
| CITY-ST-ZIP | | | | 3.4. CITY- | ST-ZIP | | | | |
| TITLE | | | DELETE | 4.1 TITLE | | | | Change | Addition |
| NAME | | | | 4. 2 NAME | | | | | |
| STREET ADDRESS | | | | 4.3 STREE | I ADDRESS | | | | |
| CITY-ST-ZIP | | | | 4.4 CITY-3 | ST-ZIP | | | | |
| TITLE | | | DELETE | 5.1 TITLE | | | | Cnange | Addition |
| NAME | | | | 52 NAME | | | | | |
| STREET ADDRESS | | | | 53 STREE | 1 ADDRESS | | | | |
| CITY-ST-ZIP | | | | 5,4 C(1Y- | ST-ZIP | | | | |
| TITLE | | | DELETE | 6.1 TITLE | | | | Change | Addition |
| NAME | | | | 6.2 NAME | | | | | |
| STREET ADDRESS | | | | 6.3 STREE | 1 ADDRESS | | | | |
| CITY-ST-ZIP | | | | 6,4 CITY - | ST-ZIP | | | | |

14. I do hereby certify that the information supplied with this filing does not qualify 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 atlachment with an address.