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

P94000066618 (7)

DOCUMENT # P9400066618 (7) MENDEZ MAMI, INC.					
Principal Place o	of Business	Mailing Address		I 100 1100 Ita 10111 91011 00114 00111 00	
1830 N.W. 21ST TERRACE MIAMI FL 33142		1830 N.W. 21ST TERR Miami Fl 33142	ACE		
				09/07/1994	3a. Date of Last Report 06/14/1995
2. Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number 65-0524836	Applied For Not Applicable
Suite, Apt #:	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Cty & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23] Zip	Country	28	Country	This corporation has liability for intal	ang ble tax under s. 199.032,
24	25	[29]	30	Florida Statutes Yes	
	Name and Address of Curre	nt Registered Agent		10. Name and Address of New Reg	Istered Agent
			81 Name		
RAPOPORT, ALLEN J			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
RAPOPORT & TRIAY P.A. 999 PONCE DE LEON BLVD., SUITE 1110			83		
	GABLES FL 33134		84 City		85 Zip Code
				pration submits this statement for the purpo	FL
SIGNATURE	of agrant, or point, in the obtained in Son, Son, and accept the obligations of, Son		OTE: Registured Agent signature requi	red when reinstating! ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS IN 12
12. TI'LE	PD	DELETE	1. 1 TITLE		Change Addition
NAME	MENDEZ, MANNY	_	1.2 NAME		
STREET LADDRESS	1830 N.W. 21ST TERR.		1.3 STREET ADDRESS		
CHY-5F-ZIF	MIAMI FL	·	1.4 CITY - ST - ZIP		
11ft F	VD	☐ DELETE	2 1 TITLE		☐ Change ☐ Addition
NAM:	CARRASCO, MARIA J		22 NAME		
STREET ADDRESS	1830 N.W. 21ST TERR.		2.3 STREET ADDRESS		
CHY-ST-ZIP	MIAMI FL	DELETE	2.4 CITY - \$1 - 2IP 3 1 TILLE		☐ Change ☐ Addition
11'th	TD DIAZ, MILAGROS		3 2 NAME		_ - -
NAME STREET ADORESS	1830 N.W. 21ST TERR.		3.3. STREET ADDRESS		
OHY-ST ZIP	MIAMI FL		34 CITY-ST-ZIP		
LHE	SD	☐ DELETE	4 1 TITLE		Change Addition
NAME	MENDEZ, EILYN		4.2 NAME		
STREET LAGORESS	1830 N.W. 21ST TERR.		4.3 STREET ADORESS		
CITY ST ZIP	MIAMI FL		4.4 CITY - ST - 2IP		Change Addition
TIFLE		☐ DELETE	5 1 3 (TLE		The change The vectors
NAM-			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
C-TY St- 7P		DELETE	5 4 CITY-ST-ZIP 6 1 TITLE		☐ Change ☐ Addition
101E		L see it	6.2 NAME		
NAME STREET ADOPESS			6.3 STREET ADDRESS		
CHY-SI-ZIC			6 4 CITY - ST - ZIP		
30111761740	1		 		2/0.03 Ft. date Otal Ace I fusher

14. I do hereby certify that the information supplied with this filing is venitarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. Ffurther certify that the information indicated on this annual report or suppliemental 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 feetiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Book 12 or Block 13 or the feetive of the corporation of the feetive of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Book 12 or Block 13 or Block 13 or Block 13 or Block 13 or Block 14 or Block 15 or Block 15 or Block 15 or Block 15 or Block 16 or Block 16 or Block 17 or Block 18 or Block 18 or Block 18 or Block 19 or Block

SIGNATURE:

2/15/86 (105)545-4054