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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000077102 (9)

THE 65 CORPORATION

information and cated on this annual fam an officer or director of the por appears in Block 12 or Block

SIGNATURE

Principal Place of Business

3809 S.W. 82ND AVENUE 3809 S.W. 82ND AVENUE #22 #22 MIAMI FL 33155 MIAMI FL 33155-6708 3. Date Incorporated or Qualified 3a. Date of Last Report 10/20/1994 01/29/1996 2. Principal Prace of Business 2a. Mailing Address 4. FEI Number Applied For APPLIED FO 26 No Applicable 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation has liability for intengible tax under s. 199.032, Yes 🔲 No Florida Statutes 25 29 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 IRIGOYEN, RAMON G H Name 3809 S.W. 82ND AVENUE Street Address (P.O. Box Number is Not Acceptable) 322 ₿3 **MIAMI FL 33155** 84 City Zip Code 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Bignation, type took ported mene of registered agent and the if applicable (NOTE Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) **PSD** DELETE Change Addition 1.1 TITLE Title IRIGOYEN, RAMON G NAME 1.2 NAME CR2E034 3809 S.W. 82ND AVE. #22 1.3 STREET ADDRESS STREET ADDRESS **MIAM! FL 33155** 1.4 CITY-ST-ZIP C TY - ST - 2/P □ DELETE Change Addition TITLE 2.1 TITLE IRIGOYEN, ESTHER B 2.2 NAME NAM-3809 S.W. 82ND AVE. #22 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33155 011Y- \$1 2 4 City - ST - ZIP DELETE Change Addition THE 3.1 THTLE NAME 32 NAME STREET ACIDRESS 3.3 STREET ADDRESS 3.4 CITY - ST- ZIP CITY: \$1-74 DELETE Change L Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - \$1 - 7/P D-TY - 5T - 2(P Change Addition DELETE 5.1 TITLE THE NAM: 5.2 NAME 5.3 STREET ADORESS STREET ADDRESS 5.4 CITY-ST-ZIP CHTY - ST - ZIP DELETE Change Addition THUE 61 TITLE NAME 82 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY - ST - ZIP DITY-ST-Z-P supplied with this tilling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the report of supplemental annual report is true and accurate and that thy signature shall have the same legal effect as if made under oath; that souther or the resolver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name 14. I do hereby certify that the information