

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000083581 (6)

1. Corporation Name

VELEZ-ILLA & ASSOCIATES, INC.



Principal Place of Business

Mailing Address

10171 S.W. 154TH CIR-CT.
UNIT 112
MIAMI FL 33196

10171 S.W. 154TH CIR-CT.
UNIT 112
MIAMI FL 33196

3. Date Incorporated or Qualified

11/14/1994

3a. Date of Last Report

08/14/1995

2. Principal Place of Business

2a. Mailing Address

21 9764 S.W., 138 AVENUE

26 9764 S.W. 138 AVENUE

Suite, Apt #, etc

Suite, Apt #, etc

22 N/A

27 N/A

City & State

City & State

23 MIAMI, FLORIDA 33186

28 MIAMI, FLORIDA 33186

Zip

Country

Zip

Country

24 33186

25 DADE

29 33186

30 DADE

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible taxes under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REYES, ALBA S
10171 S.W. 154TH CIR-CT
#112
MIAMI FL 33196

81 Name
ILLA, RICHARD C.

82 Street Address (P.O. Box Number is Not Acceptable)
9764 S.W. 138 AVENUE

83

84 City
MIAMI FL 33186

85 Zip Code
FL 33186

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

RICHARD CHARLES ILLA

JUN 10 1996

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD
NAME REYES, ALBA S
STREET ADDRESS 10171 SW 154TH CIRCLE COURT STE. 112
CITY-ST-ZIP MIAMI FL 33196

TITLE VPSD
NAME ILLA, RICHARD C
STREET ADDRESS 10171 S.W. 154TH CIR-CT UNIT 112
CITY-ST-ZIP MIAMI FL 33196

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Delete.

P/D.
ILLA, RICHARD C.
9764 S.W. 138 AVENUE
MIAMI, FL 33186.

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 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature] - DIRECTOR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JUN 10 1996

(305) 385-8354.

CR2E034 (3/96)