

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

FILED
Mar 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORENDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000089977 (0)
1. Corporation Name
AWARENESS, INC.



Principal Place of Business: 1033 S.W. 137TH COURT MIAMI FL 33184
Mailing Address: 1033 S.W. 137TH COURT MIAMI FL 33184-3004

3. Date Incorporated or Qualified: 12/12/1994
3a. Date of Last Report: 03/12/1996

2. Principal Place of Business: 21 14631 SW 104 Street
2a. Mailing Address: 26 14631 SW 104 Street
4. FEI Number: 65-0540270
Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

22. City & State: 23 Miami FLORIDA
27. City & State: 28 MIAMI FLORIDA
24. Zip: 25 33186
29. Zip: 30 33186
Country: 25 USA
Country: 30 USA

9. Name and Address of Current Registered Agent: EIJO, SILVIA, 1033 S.W. 137TH COURT, MIAMI FL 33184
10. Name and Address of New Registered Agent: 81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code (FL)

11. Pursuant to the provisions of Sections 607.02 and 607.0508, 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 607.0509, Florida Statutes.

SIGNATURE: *Juan C. Ego* (Registered Agent Signature) / *President* (NOTE: Registered Agent Signature required when reinstating)
DATE: 1-31-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: EIJO, JUAN C		1.2 NAME	
STREET ADDRESS: 1033 S.W. 137TH COURT		1.3 STREET ADDRESS	
CITY-ST-ZIP: MIAMI FL 33184		1.4 CITY-ST-ZIP	
TITLE: VSD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: EIJO, SILVIA		2.2 NAME	
STREET ADDRESS: 1033 S.W. 137TH COURT		2.3 STREET ADDRESS	
CITY-ST-ZIP: MIAMI FL 33184		2.4 CITY-ST-ZIP	
TITLE:	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		3.2 NAME	
STREET ADDRESS:		3.3 STREET ADDRESS	
CITY-ST-ZIP:		3.4 CITY-ST-ZIP	
TITLE:	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		4.2 NAME	
STREET ADDRESS:		4.3 STREET ADDRESS	
CITY-ST-ZIP:		4.4 CITY-ST-ZIP	
TITLE:	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		5.2 NAME	
STREET ADDRESS:		5.3 STREET ADDRESS	
CITY-ST-ZIP:		5.4 CITY-ST-ZIP	
TITLE:	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		6.2 NAME	
STREET ADDRESS:		6.3 STREET 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 attachment with an address.

SIGNATURE: *Juan C. Ego* (Signature of Signing Officer or Director)
DATE: 1-31-97 (305) 383-1248
Daytime Phone #

CR2E034 (9/96)