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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 28 1997 8:00am

Secretary of State

APRIL 22, 1997 305-654-7729

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500005295 (7)

ALEXIS ENTERPRISES OF MIAMI INC.

i '	ice of Business 12TH AVENUE 169	19010 N.W	Mailing Address 19010 N.W, 12TH AVENUE MIAMI FL 33169-3752							
							3.		Date of Last I	Report
	Place of Business	2a. Mailing	Address			W-1-114.	4.	FEI Number	A	pplied For
Suite, Ap	of #, €lc.	26 Suite, A	Apt #, etc.			<u> </u>	+	65-0640936		lot Applicable Additional
22	,	27	27				5.	. Certificate of Status Desired		lequired
City & Sta	ate		City & State				6.	Election Campaign Financing Trust Fund Contribution		May Be
23 Z ₀	Country	28 Zip		Coun	try		-	Trust Fund Contribution This corporation has liability for intangit		to Fees s 199 032.
24	25		30				Florida Statutes Yes No			
	g. Name and Address of Curre	nt Registered A	gent				10,	Name and Address of New Registers	d Agent	
	illiams, kevin			18	31	Name				į
	010 N.W. 12TH AVENUE		82 Street Add			Street Addre	lress (P.O. Box Number is Not Acceptable)			
MI	AMI FL 33169			Ē	33	*******		AND THE RESIDENCE OF THE PROPERTY OF THE PROPE		
				 [6	34	City			. 85 Zip	Code
					ı	•			L	
11, Pursuar office or agent. I SIGNATURE				es, the abo authorized orida Statu	by tes.	-named corporation	oratio on's i	on submits this statement for the purpose board of directors. I hereby accept the a	of changing ppointment as	its registered s registered
	Signature, typed or pented harne of registered ag		IOM) old		Agen	nt signature require				
12.		ND DIRECTORS	DELETE	13.				ADDITIONS/CHANGES TO OFFICERS A	······································	RS IN 12 Addition
TITLE	PD UMLIAMS, ESTHER		☐ DELETE	LETE 1.1 TITLE		i			∐ Change	Addition
NAME STHEET ADDRESS	40040 41347 40711 4167					ADDRESS				
CITY - ST- ZIP	MIAMI FL 33169			1.4 City		i				
TITLE	STD		DELETE	2.1 TITL		<u>' - " </u>	, ,		Change	Addition
NAME:	WILLIAMS, ESTHER			2.2 NAME						
STREET ADDRESS	40040 \$1141 40711 4147			2.3 STR	EET /	ADDRESS				
CITY - ST - ZIP	MIAMI FL 33169			2.4 CfT	Y-\$1	T-21P				
TOLE	İ		DELETE	3.1 TITE	E				Change	Addition
NAML				3 2 NAM						
STREET ADDRESS	s				•	ADDRESS				
DICE STATE			DELETE	34 CIT		Y-ZIP			Change	Addition
NAME				4 2 NA					Ondrigo	
STREET ADDRESS	\$			4		ADDRESS				
CITY ST-202	7			4.4 CITY						
Dilli			DELETE	5.1 TITL		T E			☐ Change	Addition
NAME			=	5.2 NAN					-	
STREET ADORESS	S					ADDRESS				ĺ
CHY-ST-ZIP				5.4 CITY						
TITLE			DELETE	6.1 T(T)					Change	Addition
NAME				6.2 NAM	4E					
STREET ADDRESS	s			4		ADDRESS				l

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.