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 FLORIDA DEPARTMENT OF STATE CORPORATION ANNUAL REPORT PROFIT FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State					
19967-26 96 DIVISION OF CORPORATIONS					
DOCUMENT # P95000017731 (7)					
MIAMI MODIFICATION CENTER, INC.					
Principal Place of Business Mailing Address				F LE DEHE DE HIE FOLDE BUILL BONN BÉINN DE N	ul donor iren sobru Hodol Nijoh kilo 1984
15855 MIAMI LAKE WAY DRIVE NORTH 15855 MIAMI LAKE WAY DAPT. 48 APT. 48 MIAMI LAKES FL 33014 MIAMI LAKES FL 33014			DRIVE NORTH	3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Place of Business P1.4. 20 2a Mailing Address				03/02/1995	
2. Principal Place of Business Bldg. 20 2a. Mailing Address 21 Miami Int 1 Airport Bay 22 26 P.O. Box 660520			520	4. FEI Number	Applied For Not Applicable
Suite, Apt #, etc.			/ =. V	5. Certificate of Status Desired	\$8.75 Additional
City & State		Crty & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
23 Miami Zip	FL Country		Springs FL	Trust Fund Contribution	Added to Fees
24) 3316	6 25	^{Zip} 33266-0520 3	Country 10	This corporation has liability for interest. Florida Statutes	angible tax under s. 199 032, Yes No
	9. Name and Address of Cur	rent Registered Agent	81 Name	10. Name and Address of New Regis	stered Agent
, FRITZ, CLAUDIA T					
APT. 48					
MIAMI LAKES FL 33014					
84 City FL 85 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, I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.					
SIGNATURE					
12.	Signature, typed or priction name of registered OFFICERS	lagout and tille it applicable (NOTE F AND DIRECTORS	Hogistered Agenil's gnuture	equired when reinstaling) ADDITIONS/CHANGES TO OFFICER	DAIL OR AND DIRECTORS IN 12
TITLE	PSTD	DELETE	1.3 TITLE	VPD	Change X Addition
NAME STREET ADDRESS	FRITZ, CLAUDIA T 15855 MIAMI LAKE WAY	DOME MODIL	1 2 NAME 1 3 STREET ADDRESS	CARDENAS, JORGE PO BOX 660520	RS AND DIRECTORS IN 12 Change X Addition (Change X Addition (Change X Addition
CITY-ST-ZiP	MIAMI LAKES FL 33014	DUINE MOULU	1 4 CHTY - ST - ZIP	MIAMI SPRINGS FL 33266-	.0520 R
TITLE		DELETE	2 1 TITLE	P	Change Addition
NAME STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS	PO BOX 660520	(A)
CiTY - ST - ZiP			2 4 CITY - ST-ZIP	MIAMI SPRINGS FL 33266-	0520
TITLE NAME		DEFELE	3 1 TITLE 3 2 NAME	VPO	Change Addition
STREET ADDRESS	•		3.3 STREET ADDRESS	PO BOX 660520	VA) [
CITY-S1-ZIP		DOLETE	34 CITY-ST-ZIP	MIAMI SPRINGS FL 33266-	
TITLE NAME	`	DELETE	4 1 THTLE 4 2 NAME	VPM CARDENAS, CESAR (- 💽 Change 🔼 Addition
STREET ADDRESS			4 3 STREET ADDRESS	PO BOX 660520	- /
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	MIAMI SPRINGS FL 33266-	
NAME		otten	5 2 NAME	URIBE, IRIS M.	Change K Addition
STREET ADDRESS			5 3 STREET ADDRESS	PO BOX 660520	(1011)
CITY+ST+ZIP TITLE		DELETE	5 4 CITY - ST - ZIP 6 1 TITLE	MIAMI SPRINGS FL 33266-	O520 Addition
NAME			6 2 NAME	CARDENAS, GUSTAVO (NA)
STREET ADDRESS			6 3 STREET ADDRESS	PO BOX 660520	0500
14. I do hereb	y certify that the information supp	olled with this filing is voluntarily furnis	shed and does not o	MIAMI SPRINGS FL 33266-(OZZBIRA Florida Statulac I
further certily 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 eath, 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 Shitutes, and that my name appears in Block 12 or Block 13 if changed op on an attachment with an address.					
SIGNATURE: To the signature and typed or signing officer or director To the signature and typed or signing officer or director To the signature and typed or sig					
					I I