


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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Morthair Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 093000018888 1. Corporation Name <i>Sunset Lady Inc.</i>					
Principal Place of Business <i>MIAMI, FLORIDA</i>		Mailing Address <i>15770 SW 72nd St MIAMI FL 33193</i>			
2. Principal Place of Business 21 <i>15770 SW 72nd St</i> Suite, Apt. #, etc.		2a. Mailing Address 26 <i>15770 SW 72nd St</i> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <i>March/95</i>	
22 City & State 23 <i>MIAMI FL</i> Zip 24 <i>33193</i>		27 City & State 28 <i>MIAMI FL</i> Zip 29 <i>33193</i>		3a. Date of Last Report <i>12/31/95</i>	
25 <i>DADE</i>		30		4. FEI Number <i>65-0564148</i>	
9. Name and Address of Current Registered Agent <i>Alexander Valladares 5048 SW 154th MIAMI FL 33185</i>		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <i>FL</i> 85 Zip Code			
11. Pursuant to the provisions of Sections 605.1507 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 qualifications of, Section 607.0505, Florida Statutes. SIGNATURE <i>President</i> <i>07/10/97</i> Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>President Alexander Valladares 5048 SW 154th MIAMI FL 33185</i>		11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP <i>300002277263--3</i>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Magda Marcelo Vice President 10400 SW 104th MIAMI FL 33186</i>		21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP <i>-08/26/97--01084--0114 ****165.00 ****165.00</i>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			61 TITLE 62 NAME 63 STREET ADDRESS 64 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)(c), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 person 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 in Block 14 if new, with an address.					
SIGNATURE: <i>07/10/97</i> (305) 387-5550 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CP2E034 (9/96)