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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P95000020238 (8) DOCUMENT # 1. Corporation Name

ΔΙ ΔΟΚΔ	SERVICES.	INC:.



incinal Place o	of Business	Mailing Address				F (DO) 1891 HE (BIE) DILLI BOLL BOLL			
Principal Place of Business 6804 S.W. 134TH COURT		6804 S.W. 134TH COU	6804 S.W. 134TH COURT						
MIAMI FL 331	83	MIAMI FL 33183				3. Date Incorporated or Qualified 03/13/1995	3a. Date	of Last Re	eport
Delegion Disc	ce of Business	2a. Mailing Address				4. FEI Number	· · · · · · · · · · · · · · · · · · ·	1	Applied For
Principal Plac	Ge of business	26 1795 Wes	t 39t	th	Place	65-0562732		1	Not Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
		City & State				6. Election Campaign Financing			May Be
City & State		28 Hialeah,	Floi	rić	la:	Trust Fund Contribution		Added	to Fees
Zip	Country	Zip		untry		8. This corporation has liability for	intangible ta	k under s	199.032,
	25	29 33012	30 J	ŲS.	1	Florida Statutes Yes 10. Name and Address of New F	No		
	9. Name and Address of Cur	rrent Registered Agent		81	Name	10. Name and Address of New P	registered /	gent	
	ARLOS M		82 Street Ad		Street Addre	ress (P.O. Box Number is Not Acceptable)			
	W. 134TH COURT			83					
MIAMI F	L 33183			84	City		FL	85 Zij	p Code
			.,			ation submits this statement for the pu		osino de l	opictored of
			1711 Day of the	- A	discharge are recognised	t uttan reinstatriol	DATE		
	Signature, typed or printed harro of registered a OF FICERS	agent and life if applicable (N/	TE Registere 13.			when reinstating) ADDITIONS/CHANGES TO OF	FICERS AND		
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I oo nereby 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 unde 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 of changed, or on an attachment with an address.

Carlos M. Pino, Pres. 2/19/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305)386-9212