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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000030571 (0)

MAVELA INC.

TITLE NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

IAIVAETU	1110.								
Principal Plac	e of Business	Mailing Address			{	A BURE (IIIII DETE	A BIANI ANDRI		
7925 NW 12TH MIAMI FL 3312	STREET STE 324 6	7925 NW 12TH STREET STE 324 MIAMI FL 33126-1822							
						3. Date Incorporated or Qualified 04/19/1995	3a. Date 05/01/		eport
2. Principal P	Place of Business	2a, Mailing Address				4. FEI Number			plied For
21		26 Suite Ant # etc				65-0577919	Not Applicable \$8.75 Additional		
Suite, Apt.	<b>₹, 6</b> (C.	Suite, Apt. #, etc.				5. Certificate of Status Desired		<b>ֆይ./ ጋ</b> <i>F</i> ee Re	
City & Stat	(e)	City & State			6. Election Campaign Financing		\$5.00		
23		······································	28			Trust Fund Contribution		Added t	
Zıp	Country	Zip	Cour	itry		8. This corporation has hability for i	intangible ta	x under s	199.032,
24	25	29	30				Yes 🔲		
	9, Name and Address of Curre	ent Registered Agent				10. Name and Address of New Re-	gistered Ag	ent	
	aero, Luis			B1 Nai	ne				
	5 NW 12TH STREET STE 324		Ţ	<b>82</b> Stre	oot Addre	ss (P.O. Box Number is Not Acceptab	ole)		
MIA	MI FL 33126			B3					
1		7		00					
[			[	84 City.			FL	85 Zip Code	
SIGNATURE	Structure, typod or printed ryanic of registered as	gent and title if april able (f)	Olt : Registered			oration submits this statement for the p on's board of directors. I hereby accep d when reinstating)	DATE		
12.		ND DIRECTORS	13.		<del></del>	ADDITIONS/CHANGES TO OFFIC			
TITLE	PTD	L_I-DELETE	1.1 111				L	Change	Addition
NAME	ROMERO, LUIS 7925 NW 12TH STREET STE	204	1.2 NAI						
STREET ADDRESS	7925 NW 1219 STREET STE	329		KEET ADDRE	SS				
CITY-ST-ZIP TITLE	VSD	DELFTE	1,4 GH 2,1 HJ	Y - \$1 - ZIP			F	Change	Addition
NAME	DE ROMERO, ESPERANZA S		2,2 NAI				h	y change	
STREET ADDRESS	7925 NW 12TH STREET STE	324		REET ADDRE	SS				
CITY-ST-ZIP	MIAMI FL 33126	<b>02</b> 1		IY-S1-7IP					
TITLE		☐ DELETÉ	3.1 1(1					Change	☐ Addition
NAME			3.2 NA	V£	ľ				
STREET ADDRESS			3.3 S1f	REE 1 ADDRE	ss				
CITY-ST-ZIP			3.4 CI	Y - \$1 - 7IP					
TITLE		DELETE	4.1 T/T	LE				Change	Addition
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STF	KEET ADORE	ss :				
CITY-ST-ZIP				Y - S1 - Z(P				<b>3</b>	
TITLE	1	1 I DELETE	5.1 TIT	LΕ	- 1		I	] Change	Addition

14. I do hereby certify that the information supplied with this filling 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 supplied entail 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 two receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or 1995, 13 if change do on an attachment with an address.

5.2 NAME

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

5.3 STREET ADDRESS

5 4 C(TY - ST - Z(P

11/25-97

Change

Addition

**FILED** 

May 19 1997 8:00am

Secretary of State