## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUN 1. Corporation	MENT # <b>P950</b>	00003177	<b>Ο (1)</b>				
	EB, INC.				1 10 6 (10 B) 10 C) 10 C	EEND BOOK BONEE	ili <b>a</b> li de <b>r</b> ika dibarka araan alka k
Principal Place	of Business	Mailing Address					
Principal Place of Business  2600 S.W. 3RD AVE. SUITE 301 MIAMI FL		2600 S.W. 3 SUITE 301	2600 S.W. 3RD AVE. SUITE 301				
MICHAEL F		MIAMI FL			3. Date incorporated or Qualified 04/24/1995	3a. Date o	of Last Report
. Principal Plac	ce of Business	2a. Mailing Addre	oss	<del></del>	4. FEI Number		Applied For
Suite, Apt #	, etc.	26   Suite, Apt. #,	etc		65-0582525	<u> </u>	Not Applicat
		27	Oto.		5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State		City & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be
]  Zıp	Country	Zip	Cou	ntry	8. This corporation has liability fo		Added to Fees under s. 199,032
L	25	29	30		Florida Statutes 🔲 Ye	s 🔲 No	
	9. Name and Address of Curr	ent Registered Agent		81 Name	10. Name and Address of New	Registered A	gent
POWEL	.L-COSIO, SOFIA				/T/O Do N		
	RICKELL AVE.			82 Street Add	dress (P.O. Box Number is Not Accepta	выюј	
UNIT B				83			
MIAMI FL 33131			ł	<b>84</b> City		FL	85 Zip Code
I. Pursuant to or registered	the provisions of Sections 607.05 d agent, or both, in the State of Flo	02 and 607,1508, Florida orida. Such change was a	Statutes, the about authorized by the c	re-named corpo orporation's boa	oration submits this statement for the pi and of directors. I hereby accept the ap-	urpose of chan	ging its registered off
GNATURE s	ignature, typed or printed name of registered ag-	ent and title it applicance		re-named corpo orporation's boa Agent signature require	oration submits this statement for the pr and of directors. I hereby accept the ap	urpose of chan pointment as re	ging its registered off egistered agent. I am
GNATURE S	synature, typed or printed name of registered ag OFFICERS A	ort and tills it applicable	(NOTE: Registered	Agent signature require		DATE FICERS AND D	DIRECTORS IN 12
GNATURE SI	OFFICERS A	ent and title it applicance	(NOTE Registered   13.   1 1 1   1	Agent signature require	ed when reinstaling)	DATE FICERS AND D	
SNATURE SI	synature, typed or printed name of registered ag OFFICERS A	ort and title it applicative UND DIRECTORS DELE	(NOTE Rogstend 13.  IE 1111 12 NA	Ageint signature require	ed when reinstaling)	DATE FICERS AND D	DIRECTORS IN 12
GNATURE SI  LE  ME  REFT ADDRESS	OFFICERS A  D SANCHEZ  VASQUEZ, DEBORAH &	ort and tild it application  LND DIRECTORS  DELE  T B-2703	(NOTE Roystered 13. IE 1.11: 12.NA 1.3 STI	Agent signature require	ed when reinstaling)	DATE FICERS AND D	DIRECTORS IN 12
GNATURE SI  LE ME REET ADDRESS Y-ST-7/P	DSANCHEZ  DISANCHEZ  VASQUEZ, DEBORAH &  1541 BRICKELL AVE. UNI  MIAMI FL 10121	ort and tills in application  IND DIRECTORS  DELE  T B-2703	(NOTE Roystend 13.   1 1 1 1	Agenit signature require LF ME REET ADDRESS Y-ST-ZIP	ed when reinstaling)	DATE FICERS AND E	DIRECTORS IN 12
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SINATURE SI  LEF  VE  REFT ADDRESS  Y-ST-ZIP  LEF  ME  REFH ADDRESS	DSANCHEZ  VASQUEZ, DEBORAH &  1541 BRICKELL AVE. UNI MIAMI FL 10481 SS1 20  DSANCHEZ  VASQUEZ, DEBORAH S.  1541 BRICKELL AVE. UNI  MIAMI FL 10481 SS1 20  VASQUEZ,  1541 BRICKELL AVE. UNI	T B-2703  ALONE E T B-2703	NOTE Registered  13. TE 1 1 1E 12 NA 1.3 STI 14 CIT TE 2 1 1H 22 NA 23 STE	Agent signature require  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  ME  KEET ADDRESS	ed when reinstaling)	DATE FICERS AND E	DIRECTORS IN 12 Change Addition
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SIGNATURE: DEBORAH SANCHEZ SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

04/12/96 (Jashira: Prone )