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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000031802 (8)

FILED Apr 29 1997 8:00am Secretary of State

		Mading Address 3 ATLANTIC AVE KEY LARGO FL	NUE			
						3. Date Incorporated or Qualified
2. Principal f	Place of Business	2a. Mailing Add	ess			4. FEI Number Applied For
21		26				65-0581949 Not Applicable
Suite, Apt	#, etc	Suite, Apt. #	, etc.			5. Certificate of Status Desired See Required
City & Sta	''C	City & State	,			6. Election Campaign Financing \$5.00 May Be
23 Zip	Country	28 Z _{(P}	1 6	ountry		Trust Fund Contribution Added to Fees
24	25	29	30	Jorniy		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes X No
<u> </u>	9. Name and Address of Curr		1301	7		10. Name and Address of New Registered Agent
I OI	PEZ, WENDY	-		81	Name	
	ITLANTIC AVENUE			82	Ctr = 1 1	Address (B.O. Boy Number in Not Assessable)
KEY LARGO FL 33037					SU881 F	Address (P.O. Box Number is Not Acceptable)
114-	. =			83		
Į.				84	City	les 7in Code
					City	FL 85 Zip Code
office or agent Ta SIGNATURE						corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
12.	Suprame ryperd or printed name of registered OFFICERS A	AND DIRECTORS	(NOTE Hegiste		eni e pnature	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1111,5	PD			TITLE	T	Change Addition
NAME	LOPEZ, WENDY	_		NAME	l	
STRECT ADDRESS			1.3	STREET	ADDRESS	
CITY-ST-ZIP	KEY LARGO FL 33037			CITY-S		
TITLE	1	□ 0		TITLE	1	Change Addition
NAME			2.2	NAME	1	
STHEET ADDRESS			2.3	STREET	ADDRESS	
CITA-21-51-516			2 4	city-:	ST-ZIP	
TIFE			ELETE 3.1	TITLE		Change Addition
NAME			3.2	NAME		
STREET ADDRESS			3.3	STREET	ADDRESS	
CHTY - ST - ZIP				. CITY-	ST-ZIP	
THRE		□0	1	TITLE		Change Addition
NAME.			1	NAME	1	
STREET ADDRESS					ADDRESS	
C(1) - \$1 - 201				CITY-S	ST-ZIP	☐ Change ☐ Addition
Title		ن زيا		TITLE	}	Li Ciange Li Addition
NAME PROFES ABOSES				NAME	ANDRESS	
STREET ADDRESS					ADDRESS	
CITY SI - ZIF		Th		CITY-S	i-ZIP	☐ Change ☐ Addition
NAME		۰		NAME		C outure T whentou
STREET ADDRESS					ADDRESS	
1						
Cd7-S1-7/P	I			CITY-S		ated in Section 119.07(3)(i). Florida Statutes. I further certify that the

4. I do hereby certify that the information supplied with this filing 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 supplemental 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 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.

SIGNATURE:

LOPEZ

4-21-97 (30)

(305)4584373 Daylina Phone 1