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 # P95000037937 (6)

Principal Place	R. #M406	Mailing Address 8323 LAKE DR. #M406 MIAMI FL 33166-7755			
			A .	3. Date Incorporated or Qualified	3a. Date of Last Report
				05/12/1995	05/01/1996
h1	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26	· · · · · · · · · · · · · · · · · · ·	65-0651691	Not Applicable
Suite, Apt	#, 6 YC	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	76	City & State	Tanac	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Ζφ	Country	Zip	Country	8. This corporation has liability for	
24	25		30	Florida Statutes	Yes No
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Re	eglatered Agent
į fill	OY, JOSEPH M C.P.A		81 Name		
100	N. BISCAYNE BLVD.		82 Street Add	ress (P.O. Box Number is Not Acceptal	ble)
SUI	TE 700		<u> </u>	·	
MIA	MI FL 33132		83		
}			B4 City		85 Zip Code
L.,					FL 65 ZIP COOR
office or lagent. La			uthorized by the corpora rida Statutes.	poration submits this statement for the parties to the post of directors. I hereby acce	
	Signature, typed or per lind came of registored.		Registered Agent signature requi		DATE
12.	·	AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFI	Change Addition
NAME	PETRICU PARENTA	E-3 DECEL	1.2 NAME		C Orango C ROSINOI
	PETRICH, ROBERTO 8323 LAKE DR. #M406		1.3 STREET ADDRESS		
STRUET ADDRESS	MIAMI FL 33166		1.4 CITY-ST-ZIP		
C-TY - ST - 7IP	V	DELETE	2.1 TITLE		Change Addition
NAVF	VEIGA, LUIS		2.2 NAME		
SERRET ADDRESS	8323 LAKE DR. #M406		2.3 STREET ADDRESS		i
CHY-SI-ZP	MIAMI FL 33168		2 4 CITY-ST-ZIP		
7011	S	DELETE	3.1 TITLE		Change Addition
NAMÉ	PETRICH, DIEGO		32 NAME		
STREET ADDRESS	8323 LAKE DR. #M406		3.3 STREET ADDRESS		
C(1Y+S1-2)P	MIAMI FL 33166	·	3.4. CITY+ST-ZIP		
THE		DELETE	4.1 TITLE		Change Addition
NAME	Į.		4. 2 NAME		-
STREET ADDRESS			4.3 STREET ADDRESS		
CHY+S1-709			4.4 CITY-ST-ZIP		
Title		DELETE	5.1 TrTLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	•	
CHY ST-ZiP			5 4 CITY - ST - ZIP		
TOTALE		DELETE	61 TITLE		Change Addition
NAME		//	6.2 NAME	•	
STREET ADDRESS		// / ×	6.3 STREET ADDRESS		l

SIGNATURE:

14. Too 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 of supplementa 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 receiptor of true 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, of on an already with an articles.

FILED

May 15 1997 8:00am

Secretary of State