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

PROFIT CORPORATION **ANNUAL REPORT**

1997



Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000039065 (4)

		Mailing Address 6600 S.W. 80TH ST, MIAMI FL 33143-4604			
				 Date Incorporated or Qualified 05/17/1995 	3a. Date of Last Report 04/26/1996
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	Ш - 4-	26		65-0582132	Not Applicable
Sulte, Apt.	#, BIC.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	25	29	30	Florida Statutes	Yes 📉 No
·	9. Name and Address of Cu	irrent Registered Agent		10. Name and Address of New Reg	istered Agent
	DES, ISMAEL		81 Name		
	0 S.W. 80TH ST.		82 Street Add	ress (P.O. Box Number is Not Acceptable	e)
MIA	MI FL 33143				
			83		
			84 City		85 Zip Code
dd Dura and	to the provision of Continue CO.	10000 and 002 1000 fb 0tal	100 110 110 110 110 110 110 110 110 110		FL P Code
office or	registered agent, or both, in the	State of Florida, Such change was	authorized by the corpora	poration submits this statement for the pution's board of directors. I hereby accept	the appointment as registered
agent. I a			lorida Statutes.		f-3-97
SIGNATURE	Sny artife, typed or printed name of registers	addles	PALS : ITE Registered Agont signature requ	red when teinvisiting!	Date
12.		S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 1ITLE		Change Addition
NAME	VALDES, ISMAEL	κ.	1.2 NAME		
STREET ADDRESS	6600 S.W. 80TH ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33143		1.4 CITY - ST - ZIP		
TITLE		☐ DELETE	2.1 TITLE	Macteo	Change ddilion
NAME			2.2 NAME		Anness Car
STREET ADDRESS			23 STREET ADDRESS	CHEST CONTROL OF THE	occue)
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		<i>9</i>
TITLE	}	☐ DELETE	- 3.1 11TLF		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADORESS		
CITY-\$T-ZIP		DELETE	3.4. C(1Y-ST-Z(P		Change Addition
TITLE		LI Dette le	4.1 TillE		Li Change Li Addition
NAME CENTER ADDRESS			4. 2 NAME		
STREET ADDRESS			4.3 STHEET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME		and Diville	5.2 NAME		- Singy Singy
STREET ADDRESS]		5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CHY-ST-ZIP		
TITLE	 		■ V T V 11 V 1 40		
		DELETE	6 1 TITLE		Change Addition
NAME	}	DELETE	61 TITLE 62 NAME		Change Addition
NAME Street Address		DELETE			Change Addition

14. 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 if hanged, or on an attachment with an address.

FILED

Apr 23 1997 8:00am

Secretary of State