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 # P95000043408 (0)

FILED Sep 03 1997 8:00am Secretary of State

Principal Place of Business B426 CORAL WAY MIAMI FL 33155	Mailing Address 8426 CORAL WAY MIAMI FL 33155-2334				
				3. Date Incorporated or Qualified 06/06/1995	3a. Date of Last Report 05/01/1996
2. Principal Place of Business	2a, Mailing Address			4. FEI Number	Applied For
Suite, Apt. #, etc.	Suite, Apt. #, etc.		 	65-0596584	Not Applicable \$8.75 Additional
22	27			5. Certificate of Status Desired	Fee Regulred
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution	Added to Fees
Zip Country	Zip	├	untry	8. This corporation has liability for in	
24 25 9. Name and Address of Cui	[29]	30	T	Florida Statutes 10. Name and Address of New Reg	Yes No
VALENZUELA, TOMAS	Tott Hegisteren Agett		81 Name	ID. Hame and Address of New Neg	Jistoreu Agent
8472 CORAL WAY			L		
MIAMI FL 33155			82 Street Addr	ess (P.O. Box Number is Not Acceptable	le)
			83		
E			84 City		85 Zip Code
·			,		
11. Pursuant to the provisions of Sections 607. office or registered agent, or both, in the Sagent. I am familiar with, and accept the of	0502 and 607.1508, Florida Statu lale of Florida. Such change was oligations of, Section 607.0505, Fl	tes, the a authorize orida Stat	bove-named corp d by the corporati tutes.	ioration submits this statement for the prion's board of directors. I hereby accep	urpose of changing its registered in the appointment as registered
SIGNATURE Signature typed or printed name of registation	diagent and title if applicable. (NO	II. Hogistere	d Agent signature require	ed when reinstating)	DATE
	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	
TITLE P	☐ DELEJE	: 1.1 TI	l l		☐ Change ☐ Addition 8
NAME VALENZUELA, TOMAS STREET ADDRESS 8472 CORAL WAY		12 N	·-		3
MILLIE FL AGARE		4	TREET ADDRESS		וַנָּ
TITLE VPS	DELETE	2.1 1	TLE		Change Addition
NAME HERNANDEZ, NIVIA		2.2 N	ì		
STREET ADDRESS 8516 CORAL WAY		2.3 S	REET ADDRESS		
CITY-ST-ZIP MAMI FL 33155		2.40	HTY-ST-ZIP		
TITLE VPS	☐ DELETE	3.1 TI	TLE		Change Addition
NAME alberta Can	asi Way	3.2 N	AME		
10 / 20 / 70	way		TREET ADDRESS		
CITY-SI-ZIP - MASM, 1-	C 33/33	3.4 C 4.1 Ti	ITY-ST-ZIP		Change Addition
THILE	D DECENE				C Cuarige C Addition
NAME Street address i		4. 2 N	TREET ADDRESS		į.
CITY-ST-ZIP			ITY-ST-ZIP		
TITLE	DELETE	5.1 71			Change Addition
NAME		5.2 N			
STREET ADDRESS			TREET ADDRESS		
CITY-ST-ZIP	<u></u>	5 <u>.4</u> C	17Y-S1-ZIP		
TITLE	☐ DELETE	6.1 TI	TLE		Change Addition
NAME		62 N	AME		
STREET ADDRESS		6.3 ST	IREET ADDRESS		
CITY-ST-ZIP		6.4 CI	ITY-ST-ZIP		

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 changed, or on an attachment with an address.