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

PROFIT



FLORIDA DEPARTMENT OF STATE

ANNU	IAL REPORT							
DOCUN 1. Corporation	MENT # <i>P950000</i>		DERS, INC.					
Principal Place		Mailing Address						
3014 N	W. 79TH. APENUE							
MEAME	-FL 33122				3a. Date	e of Last Repo	ort	
2. Principal Pl	lace of Business	2a, Mailing Address		4. FEI Number	L	App	oliea For	
21		26		65-0587622				
Suite, Apt. #, etc. Suite, Apt. #, etc.		····-		Certificate of Status Desired		• -		
City & State	e	City & State		6. Election Campaign Financing		\$5.00	May Be	
23 Zip	Country	Zip	Country	8. This corporation has liability for	ıntangible			
24	25	29	[30]			Agent		
	_		81 Name	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	STROZA, ROBERTO	A Date Incorporated or Qualified 3a Date of Less Report Qualified Qual						
3014 N.W. 79TH. AVENUE								
MT	AMI-FL 33122		83					
, , +,	NIM-FC SUIZE		84 City		E:t	85 Zip C	Code	
	10-1	0500 and 607 1509 Florida Statut	or the above named co	rooration submits this statement for the	nurgose o	f changing its	s registered	
				ation's board of directors. I hereby according	ept the app	pointment as	registered	
-	im familiar with, and accept the or	oligations of, Section 607,0003, Fi	onoa statutes.					
SIGNATURE	Signature, typed or printed name of registered	age at the control of		ured when relistating)		D DIDECTOR	S IN 12	
12.				ADDITIONS/CHANGES TO OFF	ICERS AIN			
TITLE	DIP							
NAME STREET ADDRESS	INUSTRUZA, ROBERTO 3014 N.W. 19TH. AYENUE							
CITY-ST-ZIP	MIAMI - FL 33122		1.4 CITY - \$1 - 7IP					
TITLE	DISIT	DELETE	2 1 TITLE			Change	Addition	
NAME	OBONAGA, ZENAIDA							
STREET ADDRESS	30,00	Epul						
CITY - ST - ZIP	MEAME-FL 331	2 Z				Change	Addition	
TITLE NAME								
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP						Change	Addition	
TITLE		☐ DELETE				onenge		
NAME								
STREET ADDRESS				30000177 	<u> </u>	69		
CITY-ST-ZIP TITLE		DELETE		**************************************	13113	Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY - ST - ZIP						Channe	Addition	
TITLE		[] DELETE				C1 Sugarge		
NAMÉ								
STREET ADDRESS			6.4 CITY ST. 7IP					
14. I do here	by certify that the information sup	pplied with this filing is voluntarily	urnished and does not d	qualify for the exemption stated in Section and accurate and that my signature	on 119.07(3)(k), Florida	Statutes I	
further c made un	erlify that the information indicated the oath; that I am an officer or d	d on this annual report or supplen irector of the corporation or the result 13 if chapped Applian at attachm	nental annual report is tru ceiver or trustee empow nent with an address	be and accurate and that my signature ered to execute this report as required	by Chapte	er 607, Florida	Statutes; an	

MASSELL DE SIGNING OFFICER OF DIRECTOR DELACA 3-13-96