

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS

APPROVED AND FILED

96 MAY -1 PM 1:49

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P95000047516

()

1. Corporation Name

MIAMI 5TH AVENUE, INC.



Principal Place of Business

Mailing Address

3. Date Incorporated or Qualified

3a. Date of Last Report

06/19/1995

2. Principal Place of Business

2a. Mailing Address

21. 2300 CORAL WAY

26. 2300 CORAL WAY

4. FEI Number

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22. City & State

27. City & State

23. MIAMI FLORIDA

28. MIAMI FLORIDA

Zip

Country

Zip

Country

24. 33145

25. US.

29. 33145

30. US.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name FLORIDA ANNUAL REPORT SERVICES, INC.

82 Street Address (P.O. Box Number is Not Acceptable) 2300 CORAL WAY SUITE # 200

83

84 City MIAMI

FL

85

Zip Code 33145

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: [Signature] AMADA CANTERA LOPEZ, PRES

NOTE: Registered Agent signature required when re-registering.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS CHANGED TO, DELETED OR DELETED OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP P/D. MIRANDA, EDGAR 4807 S.W. 67TH AVENUE MIAMI FLORIDA 33155

TITLE NAME STREET ADDRESS CITY-ST-ZIP S/T/D. SABA, ELIAS Y. 4807 S.W. 67TH AVENUE MIAMI FLORIDA 33155

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EDGAR MIRANDA

Handwritten initials and date: 4/29/96

Vertical text on the right edge of the page.