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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P95000058635 (0)

HASSETT & MONTERO, P.A.

HASSETT, MONTERO & GUERRA, P.A.

## FILED Feb 11 1997 8:00am Secretary of State



Principal Place 520 BILTMORE CORAL GABLES	WAY	Mailing Address 520 BILTMORE WAY CORAL GABLES FL 33134-5720				1 15011561 119 3010) Silit SKIN SOM SOM SOM SOM SAME SAME SAME SAME				
						3. Date Incorporated or Qualified 07/28/1995	3a. Date 03/18/		eport	
2. Principal Pl	ace of Business	2a. Mailing Add	dress			4. FEI Number		Ar	plied For	
21		26				65-0602006			t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State	9			6. Election Campaign Financing		\$5.00	May Be	
23		28				Trust Fund Contribution		Added	to Fees	
Zφ	Country Zip		Country			8. This corporation has liability for in			. 199.032	
24	25 29			30		Florida Statutes Yes No				
	g, Name and Address of Current	Registered Agent	t 		<del></del>	10. Name and Address of New Reg	platered Age	ent		
	SETT, KENNETH P			B1	Name				ļ	
	BILTMORE WAY AL GABLES FL 33134			82	Street Ad	dress (P.O. Box Number is Not Acceptable	e)	<del></del>		
	· · ·			83			***************************************			
				84	City		FL	5 Zip	Code	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State ( m familiar with, and accept the obliga	of Florida, Such cha	anna was auti	horized by	the corner	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of ch	anging it tment as	s registered registered	
SIGNATURE	Signature, typed or pricted name of registered ager					jured when reinstating)	DATE	···········		
12.	OFFICERS AND			13.		ADDITIONS/CHANGES TO OFFIC	ERS AND D	RECTOR	S IN 12	
TITLE	PD		DELETE	1,1 TITLE		SD		Change	Addition	
NAME	MONTERO, ANDRES G			1.2 NAME		CYNTHIA M. GUERRA			^	
STREET ADDRESS	1430 S BAYSHORE DR #508				ADDRESS 1329 SE 14th Drive					
CITY-ST-ZIF	MIAMI FL 33131			1.4 CiTY~S		DEERFIELD BEACH, FLORI	DA 334	441		
TITLE	VD		DELEYE	2.1 TITLE	····			Change	Addition	
NAME	HASSETT, KENNETH P			2.2 NAME	Ì			_		
STREET ADDRESS	5870 SW 37 AVE			2.3 STREET	ADDRESS					
CITY-ST-ZIP	FT LAUDERDALE FL 33312			2. 4 CITY-					İ	
TITLE			DELETE	3.1 TITLE		***************************************		Change	Addition	
NAME		_		3.2 NAME				•		
STREET ADDRESS				3 3 STREET	ADDRESS					
CITY-ST-ZIP				3.4. CITY-1	1					
TITLE			DELETÉ	41 TITLE	31 - £#C		T.	Change	Addition	
NAME				4, 2 NAME			-	•		
STREET ADDRESS				4.3 STREET	ADDRESS				ì	
				4.4 CITY-S						
CITY-ST-7/P TITLE			DELETÉ	5.1 TITLE	11 - LIF			Change	Addition	
NAME		ت.		5.2 NAME	-				1111	
					ADDRESS					
STREET ADDRESS				5.3 STREET	1					
CITY-ST-ZIP		П	DELETE	5.4 CITY - S 6.1 TITLE	1-211			Change	Addition	
TITLE		U	DECETE				L-	i euruilia	Fidulion	
NAME			İ	6.2 NAME						
STREET ADDRESS				6.3 STREET	- 1				1	
CITY-ST-ZIP				6.4 CITY-S	T-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

**SIGNATURE** 

SIGNATURE AND WHED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

305-445 Davime Phy

Daylime Phone #