SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000066039 (5)

FILED Jul 21 1997 8:00am Secretary of State

_		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report						
				08/25/1995	02/05/,1996			
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For Not Applicable			
21 Suite, Apt.	# etc	Suite, Apt. #, etc.		\$8.75 Additio				
22		27		5. Certificate of Status Desired Fee Required				
City & Stat	e	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Ζiρ	Country	Zip	Country	8. This corporation owes or has pa				
24	25	29	30	Personal Property Tax due June				
	9. Name and Address of Currer	nt Registered Agent		10, Name and Address of New Re	gistered Agent			
	NZALEZ-POLA, ENRIQUE A		81 Name					
	321 S.W. 53 STREET		82 Street Ad	dress (P.O. Box Number is Not Acceptat	ole)			
MI	AMI FL 33165		63					
			63					
			84 City		FL 85 Zip Code			
office or agent. I a	registered agont, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered ago		authorized by the corpor lorida Statutes. VE. Registered Agent signature req	rporation submits this statement for the pation's board of directors. I hereby according when renstating)	of the appointment as registered			
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12			
TITLE	PVST	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition			
NAME	GONZALEZ-POLA, ENRIQUE	A	1.2 NAME					
STREET ADDRESS	10321 S.W. 53 STREET		1.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33165	T DECESE	1.4 CITY-S1-ZIP		C Occurs D Advisor			
TITLE	D CONTALEZ DOLA ENDIQUE	☐ DELETE	2.1 TITLE		Change Addition			
NAME CERTIFICATION OF CO.	GONZALEZ-POLA, ENRIQUE 10321 S.W. 53 STREET	M	2.2 NAME					
STREET ADDRESS	MIAMI FL 33165		2.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	THE STATE OF THE S	DELETE	2. 4 CHY-ST-ZIP 3.1 TITLE		Change Addition			
NAME		tank a same to	3.2 NAME	n '				
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP			3 4. CITY-ST-ZIP					
TITLE		☐ DELETE	41 TALE		Change Addition			
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-ST-ZIP			4.4 CITY - S1 - ZIP					
TITLE		☐ DELETE	5.1 TITLE		Change Addition			
NAME			5.2 NAME					
STREET ADDRESS			5 3 STREET ADDRESS					
CITY-ST-ZIP		D be ese	5.4 CITY - ST - ZIP					
TITLE		☐ DELETE	6.1 TITLE		Change Addition			
NAME	ļ		6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					

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 logal effect as if made under oath; that I am an officer or director of the comporation 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

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. ** **XMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

	COR ANNL	PROFIT PROPATION Sandra B. Morth Secretary of Stat DIVISION OF CORPOR			Aorthan of State	n						
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	,	e of Busines	S	Mailing Address					T INDIIIOOI AID HAID! ALLIL BAINI MANK		(14 0 0) (0 1	IE (811 1881
	10321 S.W. 53 STREET 10321 S.W. 53 STREET MIAMI FL 33165 MIAMI FL 33165											
***		••		WINTER 1 E 00103					DO NOT WRI			
									3. Date incorporated or Qualified			oport
2.	Principal Pl	al Place of Business 28.			. Malling Address				08/25/1995 4. FEI Number	UZ/U	5/1996 Ap	plied For
21				26				65-0604007			I Applicable	
	Suite, Apt.	#, etc.		 	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A	
22	City & State			City & State					6. Election Campaign Financing		Fee Re \$5.00	·
23	,	_		28					Trust Fund Contribution		Added t	
	Zip	Country Zip				Country			8. This corporation owes or has p			
24			and Address of Current F	29 Senistered Agent	30	<u> </u>			Personal Property Tax due Jur 10. Name and Address of New F			No
	GO		OLA, ENRIQUE A	inginiorea Agent		81	i N	 Name	10, Name and Address of test)	ogiatorea Ag		
		21 S.W. 5				82	5 5	Street Addre	ss (P.O. Box Number is Not Accept	able)		
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						83	3					
						84	4 (City	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FL	35 Zip (Code
11	. Pursuant i	to the provis	ions of Sections 607.0502 a	and 607.1508. Florid	a Statutes.	the abov	⊥_ ve·n	amed corpo	pration submits this statement for the		anging its	registered
	office or re agent. La	egistered ag m familiar wi	ent, or both, in the State of	Florida, Such chan- ons of, Section 607.	ge was aut 5505. Florid	iorized b	by 1h	e corporation	oration submits this statement for the on's board of directors. I hereby acc	ept the appoin	lment as	registered
Į.	GNATURE											
		Signature, typod	or printed name of registered agent a OFFICERS AND I		(NOTE: Ro	opstored Ag	jerit s	ignature required	d when reinstating)	DATE	DEATOR	C (b) 40
12		PVST	OFFICERS AND E	DE	LETE	11 THE			ADDITIONS/CHANGES TO OFF		Change	Addition
NAI	ME		EZ-POLA, ENRIQUE A			1.2 NAME						
STF	HEET ADDRESS	ADDRESS 10321 S.W. 53 STREET		1.3 \$		1.3 STREET ADDRESS		DRESS				
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NAJ	ME					5.2 NAME						
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TITI NA!				□ 0ε	LLIE	6.1 TITLE 6.2 NAME				<u></u>	Change	Addition
	REET ADORESS					6.3 STREE		DRESS				
ÇIT	Y-ST- Z IP					64 CITY-	S1-2	IF				
14	informatio	n indicated (on this annual report or sup	otemental annual re	port is true	and acc	curat	te and that r	in Section 119.07(3)(i), Florida Statu ny signature shall have the same le	ual effect as if a	made und	ler oath: that I
	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 appearance with appears in Block 12 or Block 13 if changed, or on appearance with appearance appearance and the second statutes and the second statutes are second second statutes.											
appears in Block 12 or Block 13 il changed, or on no attachment with an attachment with a stack with a stac												