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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS P95000066483 (5) DOCUMENT #

Pencipal Place of Business	Mailing Address
14421 S.W. 88TH BLDG. M APT. 205 MIAMI FL 33186	14421 S.W. 88TH BLDG. M APT. 205 MIAMI FL 33186

Principal Place of Business 14421 S.W. 88TH BLDG, M APT, 205 MIAMI FL 33186		Mailing Address 14421 S.W. 88TH B MIAMI FL 33186	14421 S.W. BBTH BLDG. M APT. 205					
					3. Date Incorporated or Qualified 08/29/1995	3a. Date of Last f	Report	
2. Princ	ipal Place of Business	2a. Mailing Address			4. FEI Number	· · · · · · · · · · · · · · · · · · ·	Applied For	
21		26			65.060 8126		Not Applicable	
Suite	Suite. Apt. #, etc. Suite. Apt. # 27		r, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City 8	h		ity & State		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Ζφ 24	Country 25	Zip 29	Gountry 30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No		
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
_			81	Name				
SALNAVE, JACQUES 7901 S.W. 104TH STREET #H-113			82	Street A	Street Address (P.O. Box Number is Not Acceptable)			
N	MIAMI FL 33156		83			**************************************	· · · · · · · · · · · · · · · · · · ·	
			84	City		FL 85 Z	ip Code	
or re	suant to the provisions of Sections 607.0 egistered agent, or both, in the State of F iliar with, and accept the obligations of, S	Iorida. Such change was authori.	zed by the corp	named co oration's l	rporation submits this statement for the pu locard of directors. I hereby accept the app	rpose of changing its	registered office d agent. I am	
SIGNAT	URE Separations typoid or printed name of registered a	arrent and this it and cattle (N	OTF: Registered Ager	Il signature re	quired when reinstating)	DATE		
12.					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
THIF	DP CHATELAIN GEDADD I	DELETE	1. 1 TITLE			Change		

CR2E034 (12/95) NAME CHATELAIN, GEKAKU L 1.2 NAME 14421 SW 88TH ST. BLDG. M APT 205 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33186 CHY ST ZIP 14 CITY-ST-ZIP DELETE ☐ Change ☐ Addition 2 1 TITLE CHATELAIN, LILITA L 22 NAME 14421 SW 88TH ST. BLDG. M APT 205 STREET ADDRESS 2.3 STHEET ADDRESS MIAMI FL 33186 0117-\$1-712 24 CITY - ST - ZIP DELETE ☐ Change Addition Trice 3 1 THILE 32 NAME STREET ADERESS 33 STREET ADDRESS 34 CITY - ST-ZIP DELETE ☐ Change ☐ Addition 11116 4 1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CHY-ST-ZIF DELETE Change Addition THEF 5 1 TITLE NAME 5.2 NAME 5 3 STREET ADDRESS STEEL ADORESS 5 4 CITY - ST - ZIP CHTY-ST-ZIE TATLE DELETE 6 1 TITLE ☐ Change ☐ Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 6 4 CITY - SI - ZIP

14. For 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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trystice empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if shanged, or on an attachment with an address.

SIGNATURE:

1830/1885 JAN 1888; BIDIS BOOK 1830/ 1830/ 1830/ 1830 BIDIS BOOK 1840/ 1840/ 1848 AND 1846 FROM