FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 PROFIT					FILED		
			Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Feb 13 1998 8:00am		
1998		TER			Secretary of State		
DOCUI	MENT # P950	00067	7868 (6	5)			
	EMBROKE GENERAL, IN	IC.		•	·		
Principal Place of Business 25 S.E. 2ND AVE. SUITE 900 MIAMI FL 33131		846 #10	g Address BRICKELL AVE 000 MI FL 33131		DO NOT WRITE IN THIS SPACE		
		U\$			3. Date Incorporated or Qualified 09/01/1995		
2. Principal Pl 21	lace of Business	28. M: 26	ning Address		4. FEI Number NOT APPLICABLE		Applied For Not Applicable
Suite, Apt.	#, etc	Su Su	ite. Apt. #, etc.		5. Certificate of Status Desired	□ \$8.75	5 Additional Required
City & State	9		y & State		6. Election Campaign Financing	\$5.0	O May Be
23 Zip	Country	26 Zış	,,,,,,,,	Country	Trust Fund Contribution 8. This corporation owes or has page	id the current year l	
24	25 9. Name and Address of Cur	29] rent Registere	d Agent	30 	Personal Property Tax due June 10. Name and Address of New Re		No No
11. Pursuant f	IAMI FL 33131 to the provisions of Sections 607 ogistered agent, or both, in the Si in tamikar with, and accept the of	ate of Florida 3	Such change was	authorized by the corporat	poration submits this statement for the p lion's board of directors. I hereby accep	Durpose of changing	p Code g its registered as registered
12.	Stanature, typed or perfect carrie of a generative OF FICE RS	AND DIRECTO		If : Registered Agent signature regul 13.	red when reinstaling) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTO	ORS IN 12
TITLE	D ADDID 1005		DELETE	1.1 TITLE	······ ··· ···· ··· ··· ··· ··· ··· ··	Change	ORS IN 12 e Addition
NAME STREET ADORESS	ARDID, JOSE 848 BRICKELL AVE. #10	00		1 2 NAME 1 3 STREET ADDRESS			
CITY-ST-ZIP TITLE	MIAMI FL 33131 D		DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	······································	Change	e Addition
NAME STREET ADDRESS CITY - ST - ZIP	COURET, JUAN 848 BRICKELL AVE: #10 MIAMI FL 33131	00		2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP			
TITLE			DELETE	3.1 TITLE 3.2 NAME		Change	e 🔲 Addition
STREET ADDRESS				3.3 STHEET ADDRESS			i
CITY-ST-ZIP TITLE			DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change	e 🔲 Addition
NAME STREET ADDRESS				4. 2 NAME 4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE			DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change	e 🔲 Addition
NAME STREET ADDRESS				5.2 NAME 5.3 STREFT ADDRESS			
CITY - ST - ZIP TITLE	······································		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change	e Addition
NAME STREET ADDRESS				6.2 NAME 6.3 STREET ADDRESS		-	
CITY-ST-ZIP	orlidy that the information a make	ri wath thus datase	door not quality	64 CITY-ST-ZIP	Section 119.07(3)(i), Florida Statutes. I	further certify that t	heinformation
indicated officer or r	on this annual report or supplement	intal annual rep receiver or trust	ort is true and ac- lee empowered to	curate and that my signatu execute this report as req	re shall have the same legal effect as it uired by Chapter 607, Florida Statutes;	f made under oath; i and that my name a	that I am an appears in
SIGNAT	URE:	AVEX For		JASE ARL	1.D Sebruary 6, 1998	' (305) 877	-1001