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

PROFIT CORPORATION **ANNUAL REPORT**

1997



LLORIDA DEPARTMENT OF STATE

FILED

Aug 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000071359 (0)

Principal Place of Business Mailing Address 501 BRICKELL KEY DRIVE SUITE 400 MIAM FL 33131 MIAM FL 33131-2624							
					3. Date Incorporated or Qualified 09/15/1995	3a. Date of Las 04/28/199	
 , '	ace of Business	2a. Mailing Address			4. FEI Number	V JUNGA	Applied For
21 Suite, Apt. #, etc.			Suite, Apt. #, etc.		APPLIED FOR 65-0624082 Not Applicable \$8.75 Additional		
22		27			5. Certificate of Status Desired	1 1	Required
City & State)	City & State			6. Election Campaign Financing	\$5.0	00 May Be
23		28	T		Trust Fund Contribution		ed to Fees
Zip Country		Zip Country 30		•	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes No		
24	25 9. Name and Address of Currer		1301		10. Name and Address of New Reg		
SLO	SBERGAS, NELSON		81	Name			
	BRICKELL KEY DRIVE		82	Street Add	Iress (P.O. Box Number is Not Acceptab	le)	
	E 400						
MIAI	MI FL 33131		83				
			84	City		FL 85 Z	7ip Code
11 Pursuant t	o the provisions of Sections 607.050	12 and 607 1508 Florida Sta	tutos the above	onamed cor	poration submits this statement for the pition's board of directors. I hereby accep	uroose of changin	n its registered
SIGNATURE 12. TITLE	Signature, typed or printed traces of registered asp OFFICERS AN DPS	ent and talent applicable (I D DIRECTORS) DELETE	13.	nit signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECT Chang	
NAME PINTO, MARCIO C			1.2 NAME				
STREET ADDRESS	501 BRICKELL KEY DR. SUITE	400	1,3 STREET				
CITY-ST-ZIP TITLE	MIAMI FL 33131 DVPT	DELETE	1.4 CHY-5 2 1 Mile	5T - Z(P)		Chang	ge Addition
NAME	SIBERIOUX, ACHESON	, sittle	2.2 NAME				g
STREET ADDRESS	501 BRICKELL KEY DR. SUITE	400	2.3 STREET	ADORESS			
CITY-ST-ZIP	MIAMI FL 33131		2. 4 CITY-	S1-ZIP	<u> </u>		
TITLE	DELETE		3.1 TITLE	j		☐ Chang	ge [] Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET 3.4. CITY-1	1			
CITY-ST-ZIP TITLE	DELFTE		4 1 30LE	51 - 114	☐ Change		ge Addition
NAME			4, 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY - S	I-ZIP			
TITLE		☐ DELETE	5.1 TITL€			[_] Chang	ge L Addition
NAME			5.2 NAME	4000000			
STREET ADDRESS CITY-ST-ZIP			5.3 STREET 5.4 CITY - S	[
TITLE	DELETE		6.1 HTLF	11-71		Chang	ge Addition
NAME		<i>(</i>)	62 NAMI				
STREET ADDRESS		. \	6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CHY-S	ST-ZiP			
14. I do hereb informatio I am an of appears in	by certify that the information surphic noticated on this annual report the ficer or director of the corporation n Block 12 or Block 13 if changy (), c	erwith this litting does not qu supplemental annual report i the repeliete of trustoe omp the an alfactment with an i	uality for the exc is true and acci powered to exec address.	emption state urate and that oute this repo	d in Section 119.07(3)(i), Florida Statutes it my signature shall have the same legal ort as required by Chapter 607, Florida S	 I further certify the feet as if made tatutes; and that it 	nat the under oath; that ny name