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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000079486 (3) 1. Corporation Name

845 ENTERPRISE, INC.								
Principal Place	e of Business	Mailing Address	Mailing Address			-{	L BOULL HOURD (BUIL OLDE)	HING ON HUEL
3031 NW 13ST STREET MIAMI FL 33125		3031 NW 13ST STREET MIAMI FL 33125						
						3. Date incorporated or Qualified 10/17/1995	3s. Date of Las 04/12/199	
2. Principal Pl	ace of Business	2s. Mailing Address				4, FEI Number		Applied For
21		26				65-0638283		Not Applicable
Suite, Apt	#. etc.	Suite, Apt, #, etc.				5, Certificate of Status Desired		5 Additional Required
City & State)	City & State		•		6. Election Campaign Financing	\$5.0	00 May Be
23		28				Trust Fund Contribution		ed to Fees
Z(p)	Country	Zip 29	30 Co	ountry		8. This corporation has liability for in	intangible tax unde Yes DNo	эr s. 199.032,
24	25 g Name and Address of Currer		[30]	T .		10. Name and Address of New Re		
NEG	RON, VICTOR			81	Name		<u> </u>	
3031 NW 13ST STREET				82	Street Addre	ess (P.O. Box Number is Not Acceptab	ole)	
MIAI	MI FL 33125							
				83				
				84	City		FL 85 2	Zip Code
11. Pyrsuani i	to the provisions of Sections 607.050)2 and 607.1508, Florida Sta	tutes, the	above	e-named corp	oration submits this statement for the p	ouroose of changin	ng its registered
office or ri agent. Lar	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such change wa ations of, Section 607,0505,	is authoriza Florida Sta	ed by atutes	r the corporations.	ion's board of directors. I hereby accept	ot the appointment	as registered
SIGNATURE								
	Signature, typical or printed name of registered age OFFICERS AN	ent and the if applicable (N ID DIRECTORS	OTE: Register		int signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	CORS IN 12
12.	D			1.1 TITLE		ADDITIONAL CHARGES TO OFFIC	Chan	····
NAME	NEGRON, VICTOR		1.2	NAME				
STREET ADDRESS	3031 NW 13ST STREET		1.3	STAEET	ADDRESS			
CITY - ST - ZIF	MIAMI FL 33125	- Contra		CITY-S	T-ZIP			
TITLE		☐ DELETE	1	TITLE			L Chan	ge [_] Addition
NAME CONTEST ACCOUNTS				NAME	4070004			
STREET ADDRESS CITY: ST: ZIP			1	STREET CITY-S	ADDRESS ST_7IP			
TIFLE		☐ DELETE		TITLE	21. Tit.		☐ Chan	ge Addition
NAME.			3.2	NAME				
STREET ADDRESS			3.3	STREET	ADDRESS			,
DITY-ST-7IP			3.4.	CITY-S	ST-ZIP			
TITLE		☐ DELETE		TITLE			Chan	ige Addition
NAME				NAME				
STREET ADDRESS					ADDRESS			·
CHY-ST-ZIP TIFLE		DELETE	~	CITY-S	T-ZIP		Chan	nge Arloition
NAME				NAME				g
STREET ADDRESS			1		ADDRESS			
CITY - ST - ZIP				CITY-S				
Title		DELETE		TITLE			☐ Chan	ige Addition
NAME			6.2	NAME				
STREET ADDRESS			6.3	STREET	ADDRESS			
CITY - ST - ZIP			6.4	CITY-S	ST - ZIP			
14. I do heret informatio I am an ol	by certify that the information supplie or indicated on this annual report or a fficer or director of the corporation o	d with this filing does not qu supplemental annual report i r the receiver or trustee emp	ialify for the is true and lowered to	e exec e exec	mption stated urate and that oute this report	In Section 119.07(3)(i), Florida Statute my signature shall have the same lega t as required by Chapter 607, Florida S	is. I further certify t al effect as if made Statutes; and that r	hat the under oath; that ny name

SIGNATURE:

appears in Block 12 or Block

BNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

on an attachment with an address.

3-2-97 (305)633-3059

FILED

Mar 12 1997 8:00am

Secretary of State