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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name	P95000081496	(8)
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	KIE HIGHWAY 3133	Mailing Address 2000 S. DIXIE HIGHW #210-A MIAMI FL 33133	V AY			
2 Principal D	Place of Business			 Date Incorporated or Qualified 10/24/1995 	3a. Date of Last F	report
21		2a. Mailing Address 26		4. FEI Number 65-06/76 23	├	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		Not Applicable 5 Additional
City & State	e	City & State		6. Election Campaign Financing	Fee	Required
Zip	Country	28 Z ₍₅₎	Country	Trust Fund Contribution	LJ Adde	May Be
24	25	29	30]	8. This corporation has liability for in Florida Statutes Yes	ntangible tax under s	199.032,
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Ro		
1002 S.\ MIAMI F			83 84 City M;	olina, Hector E. ress (P.O. Box Number is Not Acceptable 02 SW 142nd. Court		o Code 33184
SIGNATURE _	ed agent, or both, in the State of Floric th, and accept the obligations of Section Signature, byted or privacy area of registered agent OFFICERS AND	and title if applicable (NC	Hector E. Mo DIE Registered Agent signature require	d when reinstating)	oose of changing its reintment as registered 5-/0-9L DATE	egistered offici agent. I am
TITLE	D OFFICENS AND	IX DELETE	13.	ADDITIONS/CHANGES TO OFFIC		RS IN 12
NAME STREET ADDRESS CITY-ST-ZIP	MOLINA, ADYS T 2000 S. DIXIE HIGHWAY #210 MIAMI FL 33133		1.2 NAME MG 1.3 STREET ADDRESS 1	olina, Hector E. 002 SW 142nd. Cour iami F1 33184	□ Change	K] Addition
TITLE NAME		DELETE	2 1 TITLE		☐ Change	Addition
STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS			
CITY-ST-ZIP			2 4 CITY-S1-ZIP			
HTLE		DELETE	3 1 THLE		☐ Change	☐ Addition
STREET ADDRESS			3.2 NAME		-	_
CITY-ST-ZIP			3.3 STREET ADDRESS 3.4 CITY-ST-ZIP			
TITLE		☐ DELETE	4 1 TITLE		Change	☐ Addition
IAME STREET ADDRESS			4.2 NAME			
CITY-ST-ZIP			4.3 STREET ADDRESS			
ITLE		DELETE	4.4 CiTY-S1-ZiP			
AME		C) Section	5 1 117LE 5.2 NAME		☐ Change	Addition
TREET ADDRESS			5.3 STREET ADDRESS			
ITY-ST-ZIP			5.4 CITY-ST-ZIP			
		☐ DELETE	6 1 TITLE	, , , , , , , , , , , , , , , , , , , ,	☐ Change	☐ Addition
			6.31444		L_j Orlange	T VOORIOU
AME			62 NAME			
THE AME TREET ADDRESS ITY-ST-ZIP			6.3 STREET ADDRESS			

SIGNATURE:

Hector E. Molina SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-10-96

(305) 858-3033