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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000083615 (1)

PROYECTO PAZ Y AMOR, INC.

Principal Place of Business

Mailing Address

15181 WEST LOCK DRIVE MIAMI LAKES FL 33014 15181 WEST LOCK DRIVE MIAMI LAKES FL 33014

## FILED May 05 1997 8:00am Secretary of State



				3. Date Incorporated or Qualified	3a. Date of Last Report	
9 Principal P	lace of Business	2a. Mailing Address		11/01/1995 4. FEI Number	07/08/1996	
21 1518 L			ch Isle Do		Applied For	
Suite, Apt.		37. 26 15181 W. Lo Suite, Apt #, etc.	xcy <u>-1516</u> 111		Not Applicable	
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	ni Lakes, FL	Cily & State  28 Miami Lo	Kes, FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for in	tangible tax under s. 199.032.	
241.330	1 4 25	29 33014	30		Yes No	
	9, Name and Address of Curre	ent Registered Agent		10. Name and Address of New Reg	istered Agent	
GAR	ICIA, NELSA		81 Name			
15181 WEST LOCK DRIVE			On Chinal As			
MIAMI LAKES FL 33014			82 Street Address (P.O. Box Number is Not Acceptable)			
MIMMI LANES LE 22014			83			
			84 City		FL 85 Zip Code	
44 Duraniani	to the provisions of Coolings 607 Of	02 and 607 1500 Elorida Statuta	a the shows second as	expection authority this statement for the pu		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered						
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
	Signature, typed or printed name of registered at		: Registered Agent signature re		DATE	
12.		ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICE	Change Addition	
TITLE	PSD	D Deterie	1.1 TOLE		C Change C Addition	
NAME	GARCIA, NELSA		1.2 NAME		[5]	
STREET ADDRESS	15181 WEST LOCK DRIVE		1.3 STREET ADDRESS		Į. Į.	
CITY-ST-ZIP	MIAMI LAKES FL 33014		1.4 C(TY - ST - Z(P			
TITLE		☐ DELETE	2.1 TITLE		Change Addition C	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS		Į.	
CITY-ST-ZIP			2. 4 CITY - ST - ZIP			
TITLE		DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS		1	
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TOLE		Change Addition	
NAME		_	4. 2 NAME			
STREET ADORESS			4.3 STREET ADDRESS			
					1	
CITY-ST-ZIP TITLE		DELFTE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition	
l l					Change E Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS		ļ.	
CITY-ST-ZIP		PARTERIA	5.4 C(1Y-S1-7)P			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME :			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CHIY-SI-ZIP			
	by cortily that the information cumpli	ad with this filias does not audifu		tod in Caction 110 07/2Vi) Florida Statuton	Lifurther portify that the	

If do nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(j), 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 legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X

4/27/97 (305)55622