

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

FILED
May 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000095527 (4)

1. Corporation Name
SACRED GROUNDS, INC.



Principal Place of Business 636 COLLINS AVENUE MIAMI BEACH FL 33149 US	Mailing Address 151 CRANDON BLVD. STE 706 KEY BISCAIYNE FL 33149-1534
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3. Date Incorporated or Qualified 12/18/1995	3a. Date of Last Report 04/05/1996
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2. Principal Place of Business 21	2a. Mailing Address 26 <i>636 Collins Avenue</i>	4. FEI Number 65-0638165	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State 23	City & State 28 <i>Miami Beach, FL</i>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip 24 <i>33139</i>	Country 25	Zip 29 <i>33139</i>	Country 30 <i>USA</i>

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
 Yes No

9. Name and Address of Current Registered Agent LIM, JACQUELINE J 151 CRANDON BLVD. STE 706 KEY BISCAIYNE FL 33149		10. Name and Address of New Registered Agent	
81 Name			
82 Street Address (P.O. Box Number is Not Acceptable)			
83			
84 City	FL	85 Zip Code	

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 agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LIM, JACQUELINE J	1.2 NAME	
STREET ADDRESS	151 CRANDON BLVD. STE 706	1.3 STREET ADDRESS	
CITY-ST-ZIP	KEY BISCAIYNE FL 33149	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROJAS, JORGE M	2.2 NAME	
STREET ADDRESS	151 CRANDON BLVD. STE 706	2.3 STREET ADDRESS	
CITY-ST-ZIP	KEY BISCAIYNE FL 33149	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LIM, ISABELO R	3.2 NAME	
STREET ADDRESS	571 ST. ANDREWS LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	INVERNESS IL 60067	3.4 CITY-ST-ZIP	
TITLE	PT <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JACQUELINE J LIM	4.2 NAME	
STREET ADDRESS	151 CRANDON BLVD, SUITE 706	4.3 STREET ADDRESS	
CITY-ST-ZIP	KEY BISCAIYNE FL	4.4 CITY-ST-ZIP	
TITLE	VPS <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JORGE M ROJAS	5.2 NAME	
STREET ADDRESS	151 CRANDON BLVD, SUITE 706	5.3 STREET ADDRESS	
CITY-ST-ZIP	KEY BISCAIYNE FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Jacqueline J. Lim* **JACQUELINE J. LIM** **PRESIDENT** *4/29/97* **305-674-8829**

CR2E034 (9/96)