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

P9600005842 (5) DOCUMENT

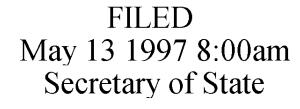
ANCALMO CORP.

Principal Place of Business

% PENINSULA REGISTERED AGENTS, INC.

Mailing Address

% PENINSULA REGISTERED AGENTS, INC.





200 SOUTH BISCAYNE BLVD. MIAMI FL 33131		200 SOUTH BISCAYNE BLVD. MIAMI FL 33131-2310					
					01/18/1996	. Date of Last R	eport
2. Principal Place of Business 2a. Mailing			Address		4 FEI Number		plied For
Sulte, Apt. #, etc.		[26]		65-0694033	Not Applicable		
22		Suite, Apt. #, etc. #4874	[21]		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State City & State					6. Election Campaign Financing	\$5.00 May Be	
Zip	Country	28]	Zip Country		Trust Fund Contribution Added to Fees		
24	ı ,			1	This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
24	9, Name and Address of Curr	29 29 Anent	[30]		Florida Statules		
PFA	IINSULA REGISTERED AGENTS		81	Name	IO. Name and Address of New Registe	eo Agent	
	SOUTH BISCAYNE BLVD.), IIIO.					
MIAMI FL 33131			82	Street Ac	dress (P.O. Box Number is Not Acceptable)		
			83				
			84	Cily		85 Zip (Dode
11. Pursuant	to the provisions of Sactions 607.0	502 and 607 1508 Florida Sta	tutos The about	a riginari e	proporation a should this statement for the purpose		
office or i agent. I a	registered agent, or both, in the Sta am familiar with, and accept the obl	ite of filorida. Such change wa ligations of, Section 607,0505,	is authorized by Florida Statute:	the corpo	orporation submits this statement for the purpos ration's board of directors. I hereby accept the	appointment as	registered
SIGNATURE	Signature, typed or printed name of registered is						
12.		ND DIRECTORS	13.	int Bignature re-	quired when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS		C IAI 12
TITLE	D	DELETE	1.1 Tille		President	Change	Addition
NAME	ANCALMO, MARIO E		1.2 NAME			A, one-igo	
STREET ADDRESS	% 200 SOUTH BISCAYNE BI	LVD.	1.3 \$16EE1		Carlos enrique Ancalmo		
CITY-ST-ZIP	MIAMI FL 33131		1.4 CITY - S		200 South Biscalyne Blvd Miami FL 33131	•	
TITLE	President	₹ . DELETE	2.1 TITLE		reasurer	Change	Addition
NAME	Oscar Ancalmo		2.2 NAML		Rocío Ancalmo		
2TREET ADDRESS	200 South Biscayne	e Blvd.	23 STREET	ADDRESS	200 South Biscayne Blvd.		
CITY-ST-ZIP	Miami FL 33131		2 4 CITY-5	S1 - 712	Miami FL 33131		
TITLE	Secretary	□ DELETE	3 1 1171.			Change	Addition
NAME	José Mario Ancalmo	5	3.2 NAME				
STREET ADDRESS	200 South Biscayne		3.3 \$1REET	ADDRESS			
CITY-ST-ZIP	Miami FL 33131		3.4. CITY - 9	51 - Z (P			
TITLE		DELETE	4.1 TALE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CHY-S	1 - ZII ⁾	TOTAL CONTROL OF THE		
TITLE		☐ OTLETE	5.1 TO LE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	- 1			
CITY-ST-ZIP		TT 22:	5.4 CITY - S	1 - ZIP			
TITLE		DELETE	6.1 TITLE			☐ Change	Addition
NAME			62 NAME	[
STREET ADDRESS			63 STREET	ADDRESS			
CITY-ST-ZIP			64 CITY-S	1 - 7(P			

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 eath; 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 addipss.