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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600007563 (5)

ASTURIAS ENTERPRISES GROUP, INC.

FILED Feb 13 1997 8:00am Secretary of State



		14			<u> </u>		
Principal Place of Business Mailing Address 4534 NORTH HIATUS ROAD 4534 NORTH HIATUS F					1 70001000 100 (B)10 B)111 BB111 BB111	·· ··	**** 1481
4534 NORTH SUNRISE FL		4534 NORTH I SUNRISE FL 3					
					3. Date Incorporated or Qualified 01/24/1996	3a. Date of Lest F	Report
2. Principal	Place of Business	2a. Mailing Ad	dress		4. FEI Number	× A	pplied For
21		26				N	ot Applicable
Suite, Ap 22	ot. #, etc	Suite, Apt	#, etc.		5. Certificate of Status Desired		Additional equired
City & St 23	ate	City & Stat	6		Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zιρ	Country	Zip	Co	untry	8. This corporation has liability for	intangible tax under s	s. 199.032, 3
24	25	29	30			Yes No	
	9. Name and Address of Curr	-	t	1	10. Name and Address of New Re	gletered Agent	
	1E LAW FIRM OF LAWRENCE J	SPIEGEL CHRTD		81 Name	DUAKDO J. HO	40	
	13 ALMERIA AVENUE			BZ Street Add	press (P.O. Box number is not acceptat	161	
C	ORAL GABLES FL 33134				34 NORTH HIATUS	RD.	
				83	_		
				84 City	NRISE	85 Zip	Code
····				1 1		FL 37	1351
11. Pursuar	nt to the provisions of Sections 607.0 rivenistered areas, or both, in the Sta	502 and 607.1508, Flo ste of Florida, Such ch	orida Statutes, the a	above-named cor	rporation submits this statement for the pation's board of directors. I hereby acceptation	ourpose of changing	its registered
agent. I	am familiar with, and accept the obl	ligations of Section 60	07.0505, Florida Sta				, ogistorou
SIGNATURE				Mesi	Dent	2/7/9	7
	Stig after: Typed or proteg forme of registered in	agent and title if applicable	14.07C P				
					ired when reinstaling)	DATE /	
		AND DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ured when reinstaling) ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	
TITLE	PSTD	AND DIRECTORS	13. DELETE 1.11	TITLE			
NAME	PSTD HOYO, EDUARDO J	AND DIRECTORS	13. DELETE 1.11 1.21	TITLE NAME		ERS AND DIRECTO	
TITLE NAME STREET ADDRES	PSTD Hoyo, Eduardo J 4534 North Hiatus Road	AND DIRECTORS	13. DELETE 1.1 1.21 1.33	TITLE NAME STREET ADDRESS		ERS AND DIRECTO	
TITLE NAME STREET ADORES COY-ST ZIP	PSTD HOYO, EDUARDO J	AND DIRECTORS	DELETE 1.1.1 1.2.1 1.3.1 1.4.1	TITLE NAME STREET ADDRESS CITY-ST-ZIP		ERS AND DIRECTO!	Addition
TITLE NAME STREET ADDRES COTY-ST ZIP TITLE	PSTD Hoyo, Eduardo J 4534 North Hiatus Road	AND DIRECTORS	13. DELETE 1.1 1.2 1.3 1.4 DELETE 2.1	TITLE NAME STREET ADDRESS CITY-ST-ZIP		ERS AND DIRECTO	Addition
TITLE NAME STREET ADDRES COY-ST-ZIP TITLE NAME	PSTD HOYO, EDUARDO J 4534 NORTH HIATUS ROAD SUNRISE FL 33351	AND DIRECTORS	DELETE 1.11 1.21 1.31 1.41 DELETE 2.11	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		ERS AND DIRECTO!	Addition
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4. 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 frustee 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/97

Daytime Phone #