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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthan

Secretary of State **DIVISION OF CORPORATIONS** 

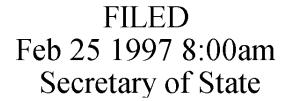
1997

## DOCUMENT # P96000009739 (9)

INCELL ENTERPRISES, CORP.

Principal Place of Business

Mailing Address





MIAMI FL 33131			MIAMI FL 33131-2522					
						3. Date Incorporated or Qualified 01/31/1996	3a. Date of Last F	Report
2. Principal Pace of Business			2a. Mailing Address			4. FEI Number		pplied For
21			26			65-0636537	<del></del>	ot Applicable
Suite, Apt. #, etc.			Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75	Additional
22		27				o, commune of outros position	Fee R	equired
City & Stati	0	<del> </del> 1	City & State			6. Election Campaign Financing	<b>\$5.00</b>	May Be
<b>23</b>   Zip	Country	28	7			Trust Fund Contribution	<del></del>	to Fees
2.11,7	25	<del></del>	Zip .	Countr	У	8. This corporation has liability for i	ntangible tax under s ] Yes	3. 199.032,
[4]	9. Name and Addres	29 s of Current Regis	tered Agent	30		Florida Statutes  10. Name and Address of New Re		
PIRE	S, RICARDO			81	Name	10. Hand and Addition of fault file	graterou Agent	
-8049 N.W. 8TH AVENUE								
MIAMI FL 33126				82	82 Street Address (P.O. Box Number is Not Acceptable)			
	MI 1 L 33120			83	<del> </del>			
₹								
				84	City		FL 85 Zip	Code
11. Pursuant to office or reagent. Far SIGNATURE	to the provisions of Secti egistered agent, or both, m familiar with, and acce	ons 607.0502 and 60 in the State of Floric pt the obligations of	07.1508, Florida Statu da. Such change was , Section 607.0505, Fl	ites, the above authorized b lorida Statute	re-named co y the corpores.	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of changing i t the appointment as	ts registered registered
	Segretary typed or printed name of	of registered agent and little	if applicable (NO	TE Angistered Aç	ent signature rec	quired when reinstating)	DATE	
12.	OF	FIGERS AND DIREC	CTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	RS IN 12
TITLE	KICARDO TI	RES.	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAMÉ	RICARDO PI PRESIDENT 600 BRICKEL	A 44.77		1.2 NAME				
STREET ADDRESS	600 BRICKELL	W8 # 10	71	1.3 STREE	T ADDRESS			
CITY - S1 - ZIP	MIAMI FL	33131		1.4 CITY-	ST-ZIP			
TITLE			DELETE	2.1 TITLE			Change	Addition
NAME				2.2 NAME				
STREET ADDRESS				23 STREE	ADDRESS		eren.	
CITY-S1-ZIP				2.4 CITY-	ST-ZIP			
THLE			DELETE	3.1 TITLE			Change	Addition
NAME				3.2 NAME	- 1	•	•	
STREET ADDRESS				3.3 STREE	F ADDRESS			
CHY-ST-7P				34. C/TY-	SY-ZIP			
1111.1			☐ DELETE	41 TITLE	Ì	,	Change	☐ Addition
NAME				4. 2 NAME				
STREET ADDRESS				4 3 STREE	T ADDRESS	•		
CITY-ST-ZiP			····	4.4 CiTY-	ST-ZIP			
TOTALE			☐ DELETE	51 TITLE			Change	Addition
NAME				5.2 NAME				
STREET ADDRESS				5.3 STREE	T ADDRESS	·		
CITY - ST - ZiF				5.4 CITY+	ST-ZIP			
T:TLE		ſ	☐ DELETE	6.1 TITLE			Change	Addition
NAME			<del>,</del>	6.2 NAME				
STREET ADDRESS	•	1		6.3 STREE	T ADDRESS			
CITY-ST-ZIP				6.4 CITY -				
<b>14.</b> Ι do herεb	v certify that the informat	tion sumplied with th	is filing does not quali	ify for the ex-	emption stat	ed 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 altachment with an address.

SIGNATURE: