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

DOCUMENT # P96000021637 (9)

CGA SYSTEMS, INC.

Principal Place of Business

8368 NORTHWEST 56TH STREET MIAMI FL 33186

SIGNATURE:

Mailing Address 8368 NORTHWEST 56TH STREET

MIAMI FL 33166-4020

FILED

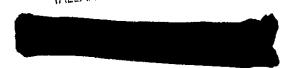
97 JUL 22 PH 1:03

3. Date Incorporated or Qualified

4-15-97

03/08/1996

SECRETARY OF STATE TALLAHASSEE, FLORIDA



3a. Date of Last Report

2. Principal P	tace of Busi	ness	2a. Mailing	2a. Mailing Address					7		 T-	IqA	oliea For	
21			26				65-	0653	826	.	+	Applicaci	e	
	Suite, Apt. #, etc.			Suite, Apt. #, etc.					of Status Desired	17)F		75 A	dditional	-
22			27					5. Certificate (LJ2			quired	
City & State	е		} -	City & State				6. Election Campaign Financing \$5.00 May Be						
23 Zip		On other	28					Trust Fund Contribution Added to Fees						_
24 Zip						ry		8. This corporation has liability for intangible tax under s. 199.032,						
24]	o Name	and Address of Current	30			Florida Stati	utes Address of New	Yes [
CORPORATION SERVICE COMPANY							Name	IU. Maille Blig	Address of New	Hedisteled (4gent		***************************************	
1201 HAYS STREET							· · · · · · · · · · · · · · · · · · ·							:
TALLAHASSEE FL 32301-2525						82 Street Address (P.O. Box Number is Not Acceptable)								
l de la companya de							13							
														i
					84	4	City			FI	85	Zip C	ode	
11 Pursuant to the provisions of Sections 607.0502 and 607.1509. Florida Statutos, the of							named cores	ration submite thi	e etalomont for th		<u>share</u>	no 35	**************************************	
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.														
	ni tamalar Wi	in, and accept the obliga	tions of, Section	1 607.0505, FIC	rida Statute	9S.								
SIGNATURE	Signature, typed	or printed name of registered agen	t and title if applicable	P (NOTE	- Ranislated Ad	nent	signature required	Luhen reinstation)		DATE		<u></u>		.
12.		OFFICERS AND			13.		agnota a required		ANGES TO OF		DIREC	TORS	111.12	ج إ−
TITLE	0			DELETE							☐ Cha		Addit:cr	چ ہے۔ م
NAME	, ARIZOLA	CESAR				1.2 NAME		1 1	מילור אוריים	OE OF	>E:	· 1	1	1
STREET ADDRESS	881 OCE	AN DRIVE, SUITE L-6		1.3		1.3 STREET ADDRESS		JE. 1.	00002 -07/29	ングラー (1)		O	ებ ებ	8
CITY-ST-ZIP	KEY BISC	CAYNE FL 33149			1.4 CITY-		1		AND	73.75	1040.	11 7:	ነ <u>ራ</u> 5 ምሮ	ļ
TITLE	·		1	DELETE	2.1 TITLE				न्यस्य		Chai		Addition	귀
NAME					2.2 NAME						_	•		ļ
STREET ADDRESS					23 STREE	T AL	DDRESS							İ
CITY-ST-ZIP					2. 4 CITY -	· \$T-	. ZIP							:
THILE			[DELETE	3 1 TITLE						Char	ge	Addition	7
NAME					3.2 NAME									1
STREET ADDRESS					3.3 STREE	T AC	DDRESS							1
CITY-ST-ZIP		,			3.4. CITY-	s۲-	ZIP							ļ
TITLE			Į	DELETE	4.1 TITLE						Char	ge	Addition	1
NAME					4. 2 NAME	:				n V	/			
STREET ADDRESS					4.3 STREET	T AD	ORESS			11				ı
CITY-ST-ZIP					4.4 CITY - 8	ST-	ZIP			100	1			
TITLE	•			DELETE	5 1 TITLE					11/	Char	ge	Addition	_
NAME					5.2 NAME					244	,			'
STREET ACCRESS					5 3 STREET	T AD	IDRESS		\sim \sim	V				i
CITY-37-31P					5.4 CITY-9	S1	ŽIP .							-
fifLE ₁				DELETE	SILTITLE				· · · · · · · · · · · · · · · · · · ·		Chan	ge	Addition	7
NAME					6.2 NAME		1							į
STREET ACCIPECS					6.3 STREET	1.40	CRESS							ŕ
CITY+ST-ZIP					6 4 CITY - 8									i
14. I do hereb information I am an off appears in	y pertify that a indicated of ficer or direct Block 12 or	the information secured in this annual eport or su for of the corporation of Block 13 if changed of	with his filing d memoral and ne receiver of tr on an attachmen	ces not qualify	of the execute and accu	emp ura cute	ption stated in ite and that m eithis report a	n Section 119 07: y signature shar is required by Ch	3.0 / Florida Stats have the same le acter 607, Florida	utes il further igal effect as a Statutos; an	certify t if made d that	hat the underly har	e r Jath Irin mg	