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	UAL REPORT 1997		Sandra B. I Secretarý DIVISION OF ĈO	of State	97 AUG 21 AH 8: 45	15.
DOCUMENT #PAWOCCO2/169/					SECHETATY OF STATE TALLAHASSIE, FLORIDA	
Un	ited F	inancia	NASS!	stance I		
Principal Plac			•	•		
56	ce of Business	142no	Avenu	<b>L</b>		
M	iami,	Florid	la 331	83	3. Date Incorporated or Qualified 3a. Date	te ef Last Report
	<u> </u>				13-08-1996 n	1a
2. Principal F	Place of Business	2a. N	failing Address		4. FEI Number 0649 725	Applied For Not Applicable
Suite, Apt.	#, etc.	<del></del>	uite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stat	te	27	City & State		6. Election Campaign Financing	\$5.00 May Be
3		28		<u>-</u>	Trust Fund Contribution	Added to Fees
Zip	Count 25	ry	ip <u> </u>	Country	8. This corporation has liability for intangible t	lax under s. 199.032, TNo
<u>'</u>		ess of Current Registe			10. Name and Address of New Registered A	
Ro:	DOLFO CA-	TUSE		81 Name		
	3 5W 1420		•	82 Street Add	dress (P.O. Box Number is Not Acceptable)	
Hia	mi, Flori	ida 3318	3	83		
•				84 City	FL	85 Zip Code
11. Pursuant	to the provisions of Sec	tions 607.0502 and 607	.1508, Florida Statutes,	the above named cor		<del></del>
OHIO OF			Such change was aut	horized by the corners	poration submits this statement for the purpose of a	changing its registered
, agent. I a	am familiar with, and acc	opt the obligations of, $\xi$	Such change was aut Section 607.0505, Floric	horized by the corpora	poration submits this statement for the purpose of a stion's board of directors. I hereby accept the appo	changing its registered intment as registered
. •	am familiar with, and acc	n, in the State of Florida cept the obligations of, \$ or of registered agent and title if a	Section 607.0505, Floric	horized by the corpora	ation's board of directors. I hereby accept the appo	changing its registered intment as registered
9IGNATURE	am familiar with, and acc Signature, typed or printed nam	cept the obligations of, §	Section 607.0505, Floric  ppicable (NOTE: R	horized by the corpora la Statutes.  registered Agent signature requestions.	altion's board of directors. I hereby accept the appointment of directors and accept the appointment of the state of the s	DIRECTORS IN 12
SIGNATURE 12.	Signature, typed or printed name	cept the obligations of, 8	Spection 607.0505, Floric	horized by the corpora la Statutes. registered Agent signature requ	alion's board of directors. Thereby accept the appointed when reinstaling)  ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
SIGNATURE	Signature typed or printed name of the composition	cept the obligations of, S of registered agent are title if a DEFICERS AND DIRECT ATTY SE	CONTRACTOR DELETE	thorized by the corporal da Statutes.  In the corporal signature required agent signature required agent signature required at the corporal signature requir	altion's board of directors. I hereby accept the appointment of directors and accept the appointment of the state of the s	DIRECTORS IN 12
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature typed or printed name of the company of t	cept the obligations of, S of registered agent are title if a DEFICERS AND DIRECT  ATTV SE 142ND A ORIDA 3	Rection 607.0505, Floric  Pricable (NOTE: R  ORS  DELETE	indized by the corporada Statutes.  legistered Agent signature required.  13.  1.1 THLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CHY-S1-ZIP	ired when renstating)  ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12  DIRECTORS IN 12  DITECTORS IN 12  DITECTORS IN 12
94GNATURE 112. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signative typed or printed name of the composition	Cept the obligations of, S of registered agent are title if a DEFICERS AND DIRECT  ATTY SE  AZ ND A  OR 1D A  - VICE PRESIDE	Rection 607.0505, Floric  PRINCABLO  ROTE: R  ORS  DELETE  J  J  DELETE  DELETE	thorized by the corporal da Statutes.  legistered Agent signature required.  1.1 Title  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE	ired when renstating)  ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12  DIRECTORS IN 12  DITECTORS IN 12  DITECTORS IN 12
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SIGNATURE:

Invited Firancial Assistance Suc.

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Beacause I did not get the first

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