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 # P96000021940 (7)

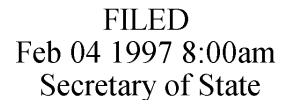
CECA CO.

155 OCEAN LANE DRIVE SHITE OILW

Principal Place of Business

Mailing Address

155 OCEAN LANE DRIVE SHITE OHW





KEY BISCAYN	E FL 33149	KEY BISCAYNE FL 33	KEY BISCAYNE FL 33149-1459							
						3. Date Incorporated or Qualified 3a. Date of Last Report 03/11/1996				
	Place of Business	2a. Mailing Address		*********		4. FEI Number	·· ···································	Ap	plied For	
21	` \	26	26						t Applicable	
Suite, Apt	.#, m tc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional	
22		27	27			b. Certificate of Status Desired	LJ	Fee Re	quired	
City & Sta	te '	City & State				6. Election Campaign Financing		\$5.00	May Be	
23	•	28				Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Cou	Country		8. This corporation has liability for i	ntangible tax	under s.	199.032,	
24	25	29	30				Yes 🔲 I			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
CADENAS, JULIETA					81 Name					
155 OCEAN LANE DRIVE					82 Street Address (P.O. Box Number is Not Acceptable)					
SUITE 911W					of cot Address (1.0. box Mariber is Mot Acceptable)					
KEY BISCAYNE FL 33149				83				·····		
-				84	City		—	35 Zip (Code	
44 6	1.0	COT 0500 - 1 007 4500 5		ĻЦ			FL			
Iffice or agent	registered agent, or both, in an familiar with, and accept	the State of Florida. Such change with bigging the obligations of, Section 607.0505	tatutes, the a vas authorize 5, Florida Sta	ibove ed by tutes	e-named corp the corporat s.	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of ch the appoin	anging its tment as	s registered registered	
SIGNATURE	Miller					ed when reinslating)	DATÉ			
12.		CERS AND DIRECTORS	13.		*	ADDITIONS/CHANGES TO OFFIC		RECTOR	S IN 12	
THLE	D -	DELETE	1.1 1	TLE				Change	Addition	
NAME	CADENAS, JULIETA		1.2 N	AME				•		
STREET ADDRESS	155 OCEAN LANE DRI	NE, SUITE 911W			ADDRESS	•				
C/TY-ST-ZIP	KEY BISCAYNE FL 33	149		ITY-S						
TITLE	D	DELETE			1 1			Change	Addition	
NAME	GALBIS, CONSUELO 1	Ī	2.2 N	AME						
STREET ADDRESS	5461 S.W. 70 PLACE		B:		ADDRESS					
CITY - ST- ZIP	MIAMI FL 33155				ST - ZIP					
THE	D	DELETE			,, ,,,		<u> </u>	Change	Addition	
NAME	CADENAS, JULIO A		3.2 N				B			
STREET ADDRESS	347 FAIRMONT ROAD				ADDRESS					
CITY - ST - ZIP	FORT LAUDERDALE F				·					
TITLE		DELETE			ST-ZIP		· · ·	Change	Addition	
NAME		Jeent Committee	4.21				l	, Shange	L. Addition	
STREET ADDRESS					ADDRESS					
	[1		ADDRESS	. that '				
CITY-S1-ZIP TITLE	1	DELETE	5.1 TI	ITY-S	1 • 211"			Change	Addition	
NAME		L., otten				•	لسيا	onange 	Addition	
			5.2 N		4555555			71	11	
STREET ADDRESS					ADDRESS			1/	214	
CITY - ST - ZIP		DELETE		ITY-S	T-ZIP		···	6 0		
TITLE		☐ DELFTE					L	Change	Addition	
NAME			6.2 N			70000207	7795	77		
STREET ADDRESS			6.3 S	TREET	ADDRESS	70000207 -02/05/97010	21 02	ñ'		
C-TY-ST-ZIP			6.4 C	ITY-\$	1 - ZIP	02/03/31 OIL	UL DU	•		

Foo hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 113.07(6) or Fishea 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 affectment with an address.

SIGNATURE: