

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

FILED

May 27 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000022590
1. Corporation Name

Principal Place of Business 1740 West 4 AVE Hialeah, fl. 33010	Mailing Address 1740 West 4 AVE Hialeah, fl. 33010
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3. Date Incorporated or Qualified 3-13-96	3a. Date of Last Report
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2. Principal Place of Business 21 Suite, Apt #, etc 22 8327NW 64th st City & State 23 MIAMI FL 33166 Zip Country	2a. Mailing Address 26 Suite, Apt #, etc 27 8327 NW 64th st City & State 28 MIAMI FL 33166 Zip Country	4. FII Number 65-0648407 Applied For Not Applicable	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ELVIE GARCIA
8901 N. Hartridge Way
Miami, Lakes, fl. 33015.

81 Name GEORGE ROJAS	82 Street Address (P.O. Box Number is Not Acceptable) 8901 N. HARTRIDGE WAY	83 MIAMI LAKES FL 33018	84 City FL	85 Zip Code
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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.

SIGNATURE *George Rojas* **GEORGE ROJAS** 4/8/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT ☐ DELETE	11 TITLE	PRESIDENT ☐ Change ☐ Addition
NAME	ELVIE GARCIA	12 NAME	ELVIE GARCIA
STREET ADDRESS	8901 N. Hartridge Way	13 STREET ADDRESS	8901 N HARTRIDGE WAY
CITY-ST-ZIP	Miami Lakes, Fl. 33105	14 CITY-ST-ZIP	MIAMI LKS FL 33018 ☐ Change ☐ Addition
TITLE	VICE -PRESIDENT ☐ DELETE	21 TITLE	VICE_PRESIDENT
NAME	DINA GONZALEZ	22 NAME	GEORGE ROJAS
STREET ADDRESS	1740 W 4 AVE	23 STREET ADDRESS	8901 N HARTRIDGE WAY
CITY-ST-ZIP	HIALEAH, FL. 33010 ☐ DELETE	24 CITY-ST-ZIP	MIAMI, LKS FL 33018 ☐ Change ☐ Addition
TITLE	VICTOR CASTILLO	31 TITLE	ELVIE GARCIA
NAME	TREASURY	32 NAME	TREASURY
STREET ADDRESS	1740 W 4 AVE	33 STREET ADDRESS	8901 N HARTRIDGE WAY
CITY-ST-ZIP	HIALEAH, FL. 33010 ☐ DELETE	34 CITY-ST-ZIP	MIAMI LKS FL 33018 ☐ Change ☐ Addition
TITLE	☐ DELETE	41 TITLE	☐ Change ☐ Addition
NAME	☐ DELETE	42 NAME	☐ Change ☐ Addition
STREET ADDRESS	☐ DELETE	43 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP	☐ DELETE	44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	☐ DELETE	51 TITLE	☐ Change ☐ Addition
NAME	☐ DELETE	52 NAME	☐ Change ☐ Addition
STREET ADDRESS	☐ DELETE	53 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP	☐ DELETE	54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME	☐ DELETE	62 NAME	☐ Change ☐ Addition
STREET ADDRESS	☐ DELETE	63 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP	☐ DELETE	64 CITY-ST-ZIP	☐ Change ☐ Addition

14. 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 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 attachment with an address.

SIGNATURE: *Elvie Garcia*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAR 17 1997

CR2E034 (9/96)